

SHANTA RABITAAN[®] FIVE WISHES[®]

RAJADEYDU

1
Shaqsigaa aan u baahan nahay in uu go'aan ii sameeyo
daryeelkeyga goorta aan anigu sameyn karin

2
Nooca daryeel caafimaad ee aan doonaayo ama aanan dooneyn

3
Side Baan Rabaa In Aan U Raaxeysto

4
Sida aan doonaayo in ay dadku ila dhaqmaan

5
Dadka aan jecelahay waxa aan rabo in ay ogaadaan

Magacaaga ku daabac

print your name

Taariikhda aad dhalatey

birthdate

Somali

Shanta Rabitaan

Waxaa jira wax yaabo badan oo gacmaheenu ka baxsan. Booga kaan ee Shanta Rabitaan wuxuu ku siin naysaa wax yaabo aad u muhiimsan—sida laguula daaweyn doono hadii aad si xun u xanuunsato. Way sahlan tahay sida aad u buuxin laheyd foormka wuxuuna kuu ogolaadaa in a ad tiraahdo sida aad rabto. Mar hadii aad buuxiso si saxna aad u saxiixdo sharci ahaan waa mid ka ansaxan ah.

Waa Maxay Shanta Rabitaan

Shanta Rabitaan waa dardaranka noolaha ee ugu horeysey ee ka hadasha waxyaabaha ku saabsan noloshada, qiirada iyo baahida ruuxa sidoo kalena rabitaanka caafimaadkaaga. Waxay kuu ogolaataa in aad doorato qofka aad rabto inuu kuu sameeyo go'aamada caafimaadka hadii aadan awoodin in aad adigu sameysato. Shanta Rabitaan waxay kuu ogolaataa in aad tiraahdo sida aad rabto ee aad jeclaan laheyd in laguula

dhaqmo hadii aad si xun aad u xanuunsato. Waxaa loo qorey ayadoo caawinaad laga heley Ururka Qareenada Ameerika Guddigiisa Sharciga iyo Gabowga, iyo qabiirta wadanka ee ugu horeysa daryeelka dhamaadka-nolosha. Sidoo kale waa sahal isticmaalkeeda. Waxaad u bahan tahay oo dhan waa in aad saxdo sanduuq, tilmaanta goobaabi, ama qor erroyo kooban.

Sida Shanta Rabitaan Uu Caawimi Karo Adiga iyo Qooskaaga

- Waxay kuu ogolaataa in aad qooskaaga, saaxiibadaada iyo takhtarkarkaaga kala hadasho sida aad dooneyso in lagu daaweeyo hadii aad si aad u xun aad u xanuunsato.
- Xubnaha qooskaaga ma ahaan doonaan kuwa qiyaasi doonaan waxa aad rabto. Ayaga waxay ka ilaalin dontaa hadii aad si xun aad u xanuunsato, sababtoo ah ma aha in ay gaaraan go'aamo ad-adag ayagoon aqoon u la'heyn waxa aad jeceshahay.
- Waxaad Shanta Rabitaan qoraalkeeda dardaranka ka ogaan kartaa waxa hooyadaada, aabahaaga, xaaskaaga, saaxiibadaada rabbaan. Goorta ayagu aadka kuugu baahan yihiin si aad u caawiso. Waad garan doontaa dhab ahaan waxa ay rabaan.

Sida Shanta Rabitaan U Bilaabatey

Mudo 12 sanadood, nin la oran jirey Jim Towey wuxuu la shaqeynaayey Mother Teresa, iyo hal sanna, wuxuu ku noolaa hoy ayadu maamuleysey ee ku yaaley Washington, DC. Khibrada uu kala yimid halkaas ayaa waxay ku dhiiri gelisey, in Mr Towey uu raadiyo nidaam qorshe ee ay dadka xanuunsan iyo qoosaskooda ay ku diyaariyaan iyo si ay ula

qabsan lahaayeen xanuunka aadka u daran. Natijada ka soo baxdey waxay aheyd Shanta Rabitaan iyo jawaabtana waxay noqotey mid xad-dhaaf ah. Waxaa lagu soo qaatey CNN-ta iyo NBC baraamijkiisa Today Show iyo bogga majalladaha *Time* iyo *Money*. Jaraa' idyadaha waxay Shanta Rabitaan ugu yeereen “qoraalka dardaranka ee qalbiga” ee ugu horeeyey.

Yaa U Baahan In Uu Isticmaalo Shanta Rabitaan

Qof kasta 18 ama ka weyn — xaasle, doob, waalidiin, caruur weyn, iyo saaxiibo. In ka badan sideed malyuum oo Ameerikaan oo da' kasta isugu jirta ayaa horey u isticmaaley. Sababtana waa si aad u hagaagsan ayay u

shaqeysaa, abukaatiyaal, takhtaro, isbitaalo iyo hoteelo, beelaha caqiidooyinka, shaqaalaha, iyo kooxaha howl-gabka ayaa ah kuwa gacanta ku hayya dukumentiyadaan.

Gobolada Shanta Rabitaan

Hadii aad ku noshahay **Degmada Columbia** ama mid ka mid ah **40 gobol** ee hoos ku qoran, waad isticmaali kartaa Shanta Rabitaan iyo adigoo qaba maan nabad ogna in si weyn u buuxiyey sharuudaha sharciga gobolkaaga:

| | | | |
|-------------|---------------|----------------|----------------|
| Alaska | Idaho | Missouri | Rhode Island |
| Arizona | Illinois | Montana | South Carolina |
| Arkansas | Iowa | Nebraska | South Dakota |
| California | Louisiana | New Jersey | Tennessee |
| Colorado | Maine | New Mexico | Vermont |
| Connecticut | Maryland | New York | Virginia |
| Delaware | Massachusetts | North Carolina | Washington |
| Florida | Michigan | North Dakota | West Virginia |
| Georgia | Minnesota | Oklahoma | Wisconsin |
| Hawaii | Mississippi | Pennsylvania | Wyoming |

Hadii gobolkaaga uusan ka mid aheyn gobolada halkan ku qoran, Shanta Rabitaan haday waafaqsaneyn sida uu aaga baahan yahay qaanuunka-qoran ee gobolkaaga. Takhtaro qaarkood ee gobolkaaga way ka caga-jiidaya in ay ogolaadaan Shanta Rabitaan. Hase-yeeshee, dad badan oo ka socda gobolo kale ee aanan ku jirin liisnaan ayaa la buuxiya Shanta Rabitaan foomka sharciga ee gobolkooda. Shanta Rabitaan waxay ka caawisaa in ay u sahasho dhamaan wax yaabaha ay u baahan yihiin iyo waxayna siisaa tusmo xubnaha qooska, saaxiibada, shaqaalaha daryeelka iyo takhaatiirta ka caawisa. Takhaatiirta badankooda iyo shaqaalaha daryeelka caafimaadka way og'yihiin in ay ay u baahan yihiin in ay dhegestaan waxa aad jeceshahay ayadoon marnaba aan la eegayn sida aad u tiri.

Sidee Baan Ugu Bedelaa Shanta Rabitaan?

Waxaa laga yaabaa in aad horey u lee dahay dardaraan noole ama abukaati daryeel caafimaad oo awoodi ku sii hayya. Hadii aad rabto in aad ka isticmaasho Shanta Rabitaan, waxa kaliya aad u baahan tahay in aad sameyso waa in aad buuxiso iyo aadna saxiixdo Shanta Rabitaan cusub sida lagu tilmaamey. Sida ugu dhaqsaha badan markaad u saxiixdo, waxay kaa qaadeysa amarkii-rasmi oo aad horey u laheyd. Si aad u hubiso inaad isticmaashey foomka saxda ah, fadlan samee sida tan:

- Burburi dhamaan koobigaaga hore ee dardaaranka noolaha hore ama abukaati daryeel caafimaad oo awoodi ku sii hayya. Ama waxaad ku qori kartaa “Revoked” (waa la’baabi’eyey) far waaweyn adigoo ku hor qoraya koobiga aad heysato. Usheeg qareenkaaga hadii uu asiga ama ayada ay ku caawisey in ay kula diyaariyaan foomamkan. *IYO*
- U sheeg Wakiilkaaga Daryeelka Caafimaad, xubnaha qooskaaga, iyo takhtarkaaga in aad buuxisay foomka cusbaa ee Shanta Rabitaan. Hubi in ay og yihiin rajadaada cusub.

RAJADA 1 — WISH 1

Shaqsigaa Aan Rabo In Uu Go'aanada Daryeelka Caafimadkeyga Gaaro Goorta Aniga Aanan Awoodin in Aan Kaligey Sameysto.

The Person I Want To Make Health Care Decisions For Me When I Can't Make Them For Myself.

Hadii aanan awoodin in aan kaligey gaaro go'aanada daryeelka caafimaadkeyga, foomkan wuxuu magacaabayaa qofka aan anigu doortey in go'aan ii gaaro. Qofkani wuxuu noqon doonaa Wakiilkeyga Daryeelka Caafimaad (ama kalmado kale ayaa la'isticmaalaa in loogu magacaabo gobolkeyga, sida wakiil, wakiil-u-fadhiya, ama baddel). Qofkan ayaa gaari doona daryeelada caafimaad ee aan rabo hadii labadaan ay dhacdo:

- Qofka illa jooga ama takhtarka i daaweynaaya markii uu ogaado in aan anaan awoodin in aan go'aano daryeel caafimaad gaaro, IYO
- Shaqaalaha daryeelka caafimaad kalena uu ku raaco in ay tani tahay mid run ah.

Hadii gobolkeyga qabo nidaam aan aniga awoodin in aan go'aan ku saabsan daryeelka caafimaadkeyga gaaro, kadib nidaamka gobolkeyga ayaa la raaci doonaa.

If I am no longer able to make my own health care decisions, this form names the person I choose to make these choices for me. This person will be my Health Care Agent (or other term that may be used in my state, such as proxy, representative, or surrogate). This person will make my health care choices if both of these things happen:

- My attending or treating doctor finds I am no longer able to make health care choices, AND
- Another health care professional agrees that this is true.

If my state has a different way of finding that I am not able to make health care choices, then my state's way should be followed.

Doorashada Qofka Saxda Ah Ee Kuu Noqon Lahaa Wakiilkaaga Daryeelka Caafimaad Picking The Right Person To Be Your Health Care Agent

Dooro qof si fiican kuu garanaayo, qof adiga kaa naxaayo, iyo qof sameyn kara go'aan addag. Xaaskaaga ama ninkaaga ama xubnaha qooskaaga ma noqon karaan dalabka ugu fiican maxaa yeeley waa dad shacuurtoodu qaadi karto. Marmar qaarkooda ayagaa ah dalabka ugu fiican. Adiga ayaa garan kara kan ugu fiican. Dalbo qof awooda in adigu uu kuu istaago oo sidii aad rabtey kuu raaca. Sidoo kale, dalbo qof aad u maleyneyso in uu agtaada u badan yahay sida uu kuu caawiyo marka aad caawimaad u baahan tahay. Hadaad dalbato xaaskaaga ama ninkaaga, xubin ka mid ah qooskaaga, ama saaxiib in uu kuu noqdo Wakiilkaaga Daryeelka Caafimaad, hubi in aad kala hadashey Rabitaanoyinkaaga iyo hubi in shaqsigaan kugu raacsan yahay isla markaana kugu ixtiraamo iyo raaco rajadaada. Wakiilkaaga Daryeelka Caafimaad waa in ay da'diisu **Markay ugu yar tahay ahaadaa 18 sano jir ama ka weyn** (Colorado, 21 sano ama ka weyn) iyo waa in **uu san** ahaan:

- Daryeelaha caafimaadkaaga, ayadoo uu ku jiro milkiilaha ama howl wadaha caafimaad ama goobta ama dhismaha adeegaha daryeelka caafimaad.
- Shaqaale ama xaaska/ninka shaqaalaha takhtarka daryeelka caafimaadkaaga.
- Wakiil ama wakiil-u-fadhiya u adeegaya 10 sanadood ama dad badan hadii ay ayadu ama asiga ahayn xaaskaaga ama ninkaaga ama qaraabadaada mooye e.

Choose someone who knows you very well, cares about you, and who can make difficult decisions. A spouse or family member may not be the best choice because they are too emotionally involved. Sometimes they **are** the best choice. You know best. Choose someone who is able to stand up for you so that your wishes are followed. Also, choose someone who is likely to be nearby so that they can help when you need them. Whether you choose a spouse, family member, or friend as your Health Care Agent, make sure you talk about these wishes and be sure that this person agrees to respect and follow your wishes. Your Health Care Agent should be **at least 18 years or older** (in Colorado, 21 years or older) and should **not** be:

- Your health care provider, including the owner or operator of a health or residential or community care facility serving you.
- An employee or spouse of an employee of your health care provider.
- Serving as an agent or proxy for 10 or more people unless he or she is your spouse or close relative.

Qofka Aan Anigu U Doorstay In Uu Wakiil Ii Noqdo Waa: The Person I Choose As My Health Care Agent Is:

Magaca Dalabkeyga Koowaad Waa *First Choice Name*

Talefoon *Phone*

Cinwaan *Address*

Magaalda/Gobolka/Sumada Boostada *City/State/Zip*

Hadii shaqsigaan uu san awoodin ama uu ogol yahay in uu dalabkaan aniga ii sameeyo, *AMA* la furey ama shar-ciyyan aan kala tagney, *AMA* shaqsigan uu dhintey, kadib dadkan waa dalabaadkeyga xigga:

If this person is not able or willing to make these choices for me, *OR* is divorced or legally separated from me, *OR* this person has died, then these people are my next choices:

Magaca Dalabaadkeyga Labaad *Second Choice Name*

TMagaca Dalabaadkeyga Sedexaad *Third Choice Name*

Cinwaan *Address*

Cinwaan *Address*

Magaalda/Gobolka/Sumada Boostada *City/State/Zip*

Magaalda/Gobolka/Sumada Boostada *City/State/Zip*

Talefoon *Phone*

Talefoon *Phone*

Hadii Aan Wax Iska Bedelo Lahaanshaha Wakiil Daryeel Caafimaad, Waan

If I Change My Mind About Having A Health Care Agent, I Will

- Jeexjeexi doonaa dhamaan koobiyadaan qiibtiisa foomka Shanta Rabitaan. *AMA*
- U sheeg qof, sida takhtarkeyga ama qooskeyga, in aan rabo in aan kansalo ama bedello Wakiilkeyga Daryeelka Caafiaad. *AMA*
- Ku qor kalmada “Revoked” (waa la’baabi’yey) far waaweyn adigoo ku hor qoraya magaca wakiilka aad rabto in aad kansasho awooda. Magaceyga ku saxiix boggaas.

- Destroy all copies of this part of the Five Wishes form. *OR*
- Tell someone, such as my doctor or family, that I want to cancel or change my Health Care Agent. *OR*
- Write the word “Revoked” in large letters across the name of each agent whose authority I want to cancel. Sign my name on that page.

Waa ogahay in Wakiilkeyga Daryeelka Caafimaad uu awoodo in uu awoodo in uu go'aan daryeel caafimaad ii gaaro. Waxaan doonayyaa in Wakiilkeygu ii sameyn karo wax yaabaha soo socda: (Fadlan xariiq dhexda ka mari liiska hoose ku qoran ee aadan rabin in Wakiilkaaga uu sameeyo.)

I understand that my Health Care Agent can make health care decisions for me. I want my Agent to be able to do the following: (Please cross out anything you don't want your Agent to do that is listed below.)

- | | |
|--|---|
| <ul style="list-style-type: none"> • Adeegyada iyo daryeelka daawadeyda dalabaad kooda ii samee, sida baaritaanka, daaweynta, ama qalitaanka. Daryeelkaan ama adeegyadaan waxaa laga yaabaa in ay noqdaan dhibaataada caafimaadkeyga waxa ay tahay, ama si loo daaweyn lahaa. Waxay ka koobnaan kartaa sida aniga laygu hayn lahaa nafta. Hadii ay daaweynta ama daryeelka uu horey u billawdo, Wakiilkeyga Daryeelka Caafimaad wuu ku sii wadi karaa ama wuu joojin karaa. | <ul style="list-style-type: none"> • Make choices for me about my medical care or services, like tests, medicine, or surgery. This care or service could be to find out what my health problem is, or how to treat it. It can also include care to keep me alive. If the treatment or care has already started, my Health Care Agent can keep it going or have it stopped. |
| <ul style="list-style-type: none"> • Turjun tilmaamo kasta ee aan ku bixiyey foomkan ama wada hadalo kale ee aan siiyey, sida uu qabo Wakiilkeyga Daryeelka Caafimaad sida uu ugartey rajadeyda iyo qiimeyntayda. | <ul style="list-style-type: none"> • Interpret any instructions I have given in this form or given in other discussions, according to my Health Care Agent's understanding of my wishes and values. |
| <ul style="list-style-type: none"> • Ogolaansho in la ii fasaxo goobta taageerida nolosha, isbitaal, goobta bukaan, ama guryaha duqowda. Wakiilkeyga Daryeelka Caafimaad wuxuu shaqaaleyn karaa shaqaale daryeel caafimaad kasta oo aan anigu u baahdo in uu i caawiyo ama i daryeelo. Wakiilkeyga shaqada wuu ka joojin karaa shaqeele daryeel caafimaad kasta, hadii uu baahdo. | <ul style="list-style-type: none"> • Consent to admission to an assisted living facility, hospital, hospice, or nursing home for me. My Health Care Agent can hire any kind of health care worker I may need to help me or take care of me. My Agent may also fire a health care worker, if needed. |
| <ul style="list-style-type: none"> • Gaar go'aanka aad ku codsan la'heyd, aad kaga qaadi la'heyd ama aad ku diidi la'heyd daaweyn, kaasoo ka soo wehelisa raashiinka raashiinka farsameysan la bixiyo iyo biyaha, iyo daaweyn kale oo kasta oo loogu tala galey in nafta iigu heyso. | <ul style="list-style-type: none"> • Make the decision to request, take away or not give medical treatments, including artificially-provided food and water, and any other treatments to keep me alive. |
| <ul style="list-style-type: none"> • Arag iyo aqbal in la sii daayo rekorkeyga daawada iyo feelalkeyga shaqsiyaatka. Hadii aan u baahdo in aan magaceyga ku saxiixo si aan u helo mid ka mid ah feelalkaan, Wakiilkeyga Daryeelka Caafimaad ayaa aniga ii saxiixi kara. | <ul style="list-style-type: none"> • See and approve release of my medical records and personal files. If I need to sign my name to get any of these files, my Health Care Agent can sign it for me. |
| <ul style="list-style-type: none"> • Ii guuri gobol kale si aan u helo daryeelka aan u baahan nahay ama si aad uqabato rajadeyda. | <ul style="list-style-type: none"> • Move me to another state to get the care I need or to carry out my wishes. |
| <ul style="list-style-type: none"> • Fasax ama Diid si loo fasaxo daaweyn ama habka loo baahan yahay in wax loo qabto sida uu iiga caawin lahaa xanuunka. | <ul style="list-style-type: none"> • Authorize or refuse to authorize any medication or procedure needed to help with pain. |
| <ul style="list-style-type: none"> • Ku dhaqaaq nidaam sharci oo kasta ee loo baahan yahay si loo qabto rajadeyda. | <ul style="list-style-type: none"> • Take any legal action needed to carry out my wishes. |
| <ul style="list-style-type: none"> • Ku tabarruc unug kasta ee la isticmaali karo ama xubnaheyna sida uu qabo sharciga. | <ul style="list-style-type: none"> • Donate useable organs or tissues of mine as allowed by law. |
| <ul style="list-style-type: none"> • Ii codso Medicare, Medicaid, ama barnaamij kale ama manfac ceymis kale. Wakiilkeyga Daryeelka Caafimaad wuu arki karaa feelalkeyga shaqsiyaatka, sida rekoorka bangiga, si loo ogaado waxa loo baahan yahay si loo buuxiyo foomamkan. | <ul style="list-style-type: none"> • Apply for Medicare, Medicaid, or other programs or insurance benefits for me. My Health Care Agent can see my personal files, like bank records, to find out what is needed to fill out these forms. |
| <ul style="list-style-type: none"> • Waxaa hoos lagu qorey isbedel kasta, ku dar, ama xadidaada awooda Wakiilkeyga Daryeelka Caafimaad. | <ul style="list-style-type: none"> • Listed below are any changes, additions, or limitations on my Health Care Agent's powers. |

RAJADA 2 — WISH 2

Rajadeyda Ee Nooca Daaweynta Aan Anigu Doonaayo ama Aanan Dooneyn.

My Wish For The Kind Of Medical Treatment I Want Or Don't Want.

Waxaan amminsanahay in nolosheydu tahay mid qiime sare leh iyo waxaan u qalmaa in si sharaf leh la iila dhaqmo. Hadii woqtigeyga yimaado oo aan aad u xanuunsado iyo aanan awoodin in aan nafteyda u hadlo, waxaan rabaa rajooyinkaan soo socoda, iyo tilmaamo kale ee aan sii yey Wakiilkeyga Daryeelka Caafimaad, u baahan in la dhowro iyo lana raaco.

Waxa Aad U Baahan Tahay In Aad Qalbiga Ku Xafido Hadii Aad Tahay Daryeelaheyga

- Ma'rabo in aan xanuun ku sii jiro. Waxaan rabaa in takhtarkeyga uu issiyo daawo igu fillan oo iga joojisa xanuunka, xitaa hadii taasi micnaheedu yahay in taa iga keeni karto lulmo ama hurdo badan daawada darteed.
- Ma'rabo in takhtarkeyga ama kalkaaliyaheyga wax igu sameeyaan ama iga dhaafto ayadoo ujeedadoodu tahay in ay nafta iga qaadaan.
- Waxaan rabaa in afka leyga siiyo raashiin iyo cabitaan, iyo in ley nadiifiyo layna qandaciydo.

I believe that my life is precious and I deserve to be treated with dignity. When the time comes that I am very sick and am not able to speak for myself, I want the following wishes, and any other directions I have given to my Health Care Agent, to be respected and followed.

What You Should Keep In Mind As My Caregiver

- I do not want to be in pain. I want my doctor to give me enough medicine to relieve my pain, even if that means that I will be drowsy or sleep more than I would otherwise.
- I do not want anything done or omitted by my doctors or nurses with the intention of taking my life.
- I want to be offered food and fluids by mouth, and kept clean and warm.

Hadii Ay Dhacdo Xaalad Deg-Deg In Case Of An Emergency

Hadii jirto xaalad caafimaad oo deg-deg ah iyo ay yimaadaan shaqaalaha adeega deg-dega, waxaa laga yaabaa in ay fiiriyaan hadii aad qabto foomka ama jijinta gacanta ee **Dib Ha U Naaxin**. Gobolo badan ayaa waxay shasiga uga baahan yihiin in uu buuxiyo foomka **Dib Ha U Naaxin** iyo takhtarna uu saxiixaa. Foomkan wuxuu shaqaalaha adeega deg-dega u ogoaada in ay ogaadaan in adiga aadan u baahneyn in ay isticmaalaan daaweynta nonol-gargaaraha goorta aad dhimaneyso. Fadlan la tasho takhtarkaaga hadii aad u baahan tahay in aad buuxiso foomka **Dib Ha U Naaxin**.

If you have a medical emergency and ambulance personnel arrive, they may look to see if you have a **Do Not Resuscitate** form or bracelet. Many states require a person to have a **Do Not Resuscitate** form filled out and signed by a doctor. This form lets ambulance personnel know that you don't want them to use life-support treatment when you are dying. Please check with your doctor to see if you need to have a **Do Not Resuscitate** form filled out.

Waa Maxay Micnaha Ay li Leedahay “Daawada Nolol-Gargaarka”

Daawada nolol-gargaarka micnaheedu waa nooc kata oo daaweyn ah, qalab ama daawo nafta igu sii haysa. Daawada nolol-gargaarka waxay ka kooban tahay: qalabka daaweynta oo aniga leygu xirrey si iiga caawiyo in aan neefsado; raashiin iyo biyo qalabka daawenta leygu soo gaarsiyo (sida tubada leysku quudiyo); qabalbka la isticmaalo marka ay wadnahaaga garaaca ka joogsadaan; qaliin weyn; dhiig ku shubida; qalabka lagu nadiifiyo dhiiga; daawada jeermiska disha; Iyo wax kasta oo kale oo lala dan lee yahay in aan sii noolaado. Hadii aan jecleysto in aan xadido daaweynta nolol-gargaaraha sababtuna tahay aaminsanaanteyda diin ama shaqsi ahaanba, xadkaasi waxaan ku qoreyaa hoose. Tani waxaan u sameyneyaa in aan ku cadeeyo waxa aan rabo iyo xaaladeyda.

What “Life-Support Treatment” Means To Me

Life-support treatment means any medical procedure, device or medication to keep me alive. Life-support treatment includes: medical devices put in me to help me breathe; food and water supplied by medical device (tube feeding); cardiopulmonary resuscitation (CPR); major surgery; blood transfusions; dialysis; antibiotics; and anything else meant to keep me alive. If I wish to limit the meaning of life-support treatment because of my religious or personal beliefs, I write this limitation in the space below. I do this to make very clear what I want and under what conditions.

Nooca daaweynta caafimaad ee aan rabo ama aanan rabin marka aan ku jiro afartaan marxalado hoose ku qoran waa kan. Waxaan rabaa Wakiilkeyga Daryeelka Caafimaadkeyga, qooskeyga, takhaatiirteyda iyo shaqaalaha daryeelka caafimaadka ee kale, saaxiibadeyda iyo dhamaan kuwa kale in ay ogaadaan tilmaamahaan.

Here is the kind of medical treatment that I want or don't want in the four situations listed below. I want my Health Care Agent, my family, my doctors and other health care providers, my friends and all others to know these directions.

Dhimashada Udhaw:

Hadii takhtarkeyga ama shaqaale daryeele caafimaad labadoodaba go'aamiyaan in aan dhimman doono mudo yar gudaheed, iyo nolol-gargaaraha saacada dhimashadeyda dib u dhigayo oo kaliya (dalbo *mid* ka mid ah wax yaabaha soo socda):

Close to death:

If my doctor and another health care professional both decide that I am likely to die within a short period of time, and life-support treatment would only delay the moment of my death (Choose *one* of the following):

- Waxaan rabaa in laygu haayo nolol-gargaare.**
I want to have life-support treatment.
- Ma'doonaayo in daawada nolol-gargaaraha. Hadii laygu bilaabeyna, waxaan rabaa in leyga joojiyo.**
I do not want life-support treatment. If it has been started, I want it stopped.
- Waxaan rabaa in laygu haayo daaweynta nolol-gargaaraha hadii takhtarkeygu aaminsan yahay in ay i caawineyso. Balse waxaan rabaa in takhtarkeyga iga joojiyo igu heynta daaweynta nolol-gargaaraha hadii uusan iga caawineyn xaalada caafimadkeyga iyo calaamadaha cudurka.**
I want to have life-support treatment if my doctor believes it could help. But I want my doctor to stop giving me life-support treatment if it is not helping my health condition or symptoms.

Suuxsan Iyo Aanan La Fileyn In Ka Soo Tooso Ama Ladnaado:

Hadii takhtarkeyga iyo shaqaalaha daryeelka caafimaadka labadoodaba go'aamiyaan in aan suuxsan nahay taas oo aan leyga fillaneyn in aan ka soo tooso ama ladnaado, iyo maskaxdana ka dhaawacanahay, iyo in laygu wado nolol-gargaaraha dib u idhagayo dhimashadeyda oo kaliya (Dalbo *mid* ka mid ah kuwa soo socda):

- Waxaan rabaa in laygu haayo nolol-gargaare.**
I want to have life-support treatment.
- Ma'doonaayo in daawada nolol-gargaaraha. Hadii laygu bilaabeyna, waxaan rabaa in leyga joojiyo.**
I do not want life-support treatment. If it has been started, I want it stopped.
- Waxaan rabaa in laygu haayo daaweynta nolol-gargaaraha hadii takhtarkeygu aaminsan yahay in ay i caawineyso. Balse waxaan rabaa in takhtarkeyga iga joojiyo igu heynta daaweynta nolol-gargaaraha hadii uusan iga caawineyn xaalada caafimadkeyga iyo calaamadaha cudurka.**
I want to have life-support treatment if my doctor believes it could help. But I want my doctor to stop giving me life-support treatment if it is not helping my health condition or symptoms.

Dhaawac Maskaxda Oo Aad u Xun Iyo Oo Joogtana Ah iyo Aan La Fileyn Ladnaansho:

Hadii takhtarkeyga iyo shaqaalaha daryeelka caafimaadka labadoodaba go'aamiyaan in dhaawac maskax oo aad u daran iyo joogtana ah qabo, aan awoodo in aan furo indhaheya, balse aanan awoodin in aan hadlo ama wax fahmo iyo aanan la fileyn in aan sii roonaado, iyo iyo in laygu wado nolol-gargaaraha dib u idhagayo dhimashadeyda oo kaliya (Dalbo *mid* ka mid ah kuwa soo socda):

- Waxaan rabaa in laygu haayo nolol-gargaare.**
I want to have life-support treatment.
- Ma'doonaayo in daawada nolol-gargaaraha. Hadii laygu bilaabeyna, waxaan rabaa in leyga joojiyo.**
I do not want life-support treatment. If it has been started, I want it stopped.
- Waxaan rabaa in laygu haayo daaweynta nolol-gargaaraha hadii takhtarkeygu aaminsan yahay in ay i caawineyso. Balse waxaan rabaa in takhtarkeyga iga joojiyo igu heynta daaweynta nolol-gargaaraha hadii uusan iga caawineyn xaalada caafimadkeyga iyo calaamadaha cudurka.**
I want to have life-support treatment if my doctor believes it could help. But I want my doctor to stop giving me life-support treatment if it is not helping my health condition or symptoms.

In A Coma And Not Expected To Wake Up Or Recover:

If my doctor and another health care professional both decide that I am in a coma from which I am not expected to wake up or recover, and I have brain damage, and life-support treatment would only delay the moment of my death (Choose *one* of the following):

Permanent And Severe Brain Damage And Not Expected To Recover:

If my doctor and another health care professional both decide that I have permanent and severe brain damage, (for example, I can open my eyes, but I can not speak or understand) and I am not expected to get better, and life-support treatment would only delay the moment of my death (Choose *one* of the following):

Xaalad Kale Ee Aanan Jecleyn In Leygu Wado Si Nafta Ay Igu Sii Jirto:

Hadii ay jirto xaalad kale taasoo aniga aanan jecleyn in la ii helo daaweynta nolol-gargaaraha, hoose ayaan ku qeexayaa. Xalada tan, waxaan aamin sanahay in qarashka iyo xamuulada daaweynta nolol-gargaaraha uu aad uga badan yahay uusan manaafacaadkiisa iigu qalmeyn. Sidaa darteed, xaaladan marka ay dhacdo, Ma’doonaaayo daaweynta nolol-gargaaraha. (Tusaale ahaan, waxaad qori kartaa “Xaalada marxalada ugu danbeysey.” Taasi micnaheedu waa in caafimaadkaaga uu ka sii darey. Adiga si kasta aadan u awoodin in aad naftaada daryeesho, maskax ama jir ahaanba. Daaweynta nolol-gargaaraha kaama caawinni doono in aad ka soo toosto. Fadlan boos bannee hadii aadan qabin xaalad kale ee aad qeexeyso.)

*S*edexda Rabitaan ee xiga waxay la xiriirta waxa ay jeceshay nafteyda, qiirada iyo baahida ruuxa. Muhiim ayna ii yihiin. Goortaan ku dhawaada dhamaadka nolosheyda waxaan rabaa in la iila dhaqmo si sharaf leh, sidaa darteed, waxaan dadka ka rabaa in ay ii sameeyaan waxyaabaha ku qoran Rajadeyda 3, 4, 5 goorta la awoodo in la sameeyo. Waan garanayaa in qooskeyga, takhaatiirteyda iyo shaqaalaha daryeelka caafimaadka, saaxiibadeyda, iyo kuwa kale waxaa laga yaabaa in aynan awoodin in ay ii sameeyaan waxyaabahaan ama sharci ahaan aanan looga baahneyn in ay ii sameeyaan. Ma filaayo in rabitankaan soo socoda in kuwa cusub la dhigo ama lagu sii daro mas’uuliyada dhakhaatiirteyda ama shaqaalaha daryeelka caafimaadka. Sidoo kale ma filaayo in Rabitaanoyinkaan ay fasaxeyso takhtarkeyga ama shaqaalaha daryeelka caafimaadka in ay i siyaan daryeelka haboon oo sharciga weydiistey.

In Another Condition Under Which I Do Not Wish To Be Kept Alive:

If there is another condition under which I do not wish to have life-support treatment, I describe it below. In this condition, I believe that the costs and burdens of life-support treatment are too much and not worth the benefits to me. Therefore, in this condition, I do not want life-support treatment. (For example, you may write “end-stage condition.” That means that your health has gotten worse. You are not able to take care of yourself in any way, mentally or physically. Life-support treatment will not help you recover. Please leave the space blank if you have no other condition to describe.)

*T*he next three wishes deal with my personal, spiritual and emotional wishes. They are important to me. I want to be treated with dignity near the end of my life, so I would like people to do the things written in Wishes 3, 4, and 5 when they can be done. I understand that my family, my doctors and other health care providers, my friends, and others may not be able to do these things or are not required by law to do these things. I do not expect the following wishes to place new or added legal duties on my doctors or other health care providers. I also do not expect these wishes to excuse my doctor or other health care providers from giving me the proper care asked for by law.

RAJADA 3 — WISH 3

Rajadeyda Istariixa Aan Rabo In Aan Ahaado.

My Wish For How Comfortable I Want To Be.

(Fadlan qalinka saar wax kasta ee aadan ku raacsaneyn.)

(Please cross out anything that you don't agree with.)

- Ma' rabo in aan xanuun ku sii jiro. Waxaan rabaa in takhtarkeyga uu isiiyo daawo igu fillan oo iga joojisa xanuunka, xitaa hadii taasi micnaheedu yahay in taa iga keeni karto lulmo ama hurdo badan daawada darteed.

- I do not want to be in pain. I want my doctor to give me enough medicine to relieve my pain, even if that means I will be drowsy or sleep more than I would otherwise.

- Hadii aan yeesho astaan muraggo, laba-labo, neefta igu yaraato, ama muuq dhalanteed, waxaan rabaa daryeel isiiyaheeyga inuu qabto wax alla waxa karaankiisu o si leygu caawini lahaa.

- If I show signs of depression, nausea, shortness of breath, or hallucinations, I want my care givers to do whatever they can to help me.

- Hadii ay qandho i hayso waxaan rabaa in madaxeyga la ii saaro goot qoyan oo qabow ah.

- I wish to have a cool moist cloth put on my head if I have a fever.

- Si faruuraheeyga iyo afkeyga u qalalin waxaan rabaa in la qooyo.

- I want my lips and mouth kept moist to stop dryness.

- Waxaan jeclaan lahaa in aan biyo qandacan ku qabeysoto. Waxaan jeclaan lahaa in aan mar waliba fareesh iyo nadiif ahaado.

- I wish to have warm baths often. I wish to be kept fresh and clean at all times.

- Waxaan jeclaan lahaa in leygu daliigu saliidaha inta la'awoodo ee suurto galka ah.

- I wish to be massaged with warm oils as often as I can be.

- Sida ugu suurto galka waxaan jeclaan laa in la'ii cayaaro muusiga aan ugu jecelahay ilaa saacada dhimashadeydu laga gaarayo.

- I wish to have my favorite music played when possible until my time of death.

- Waxaan jeclaan lahaa in aan heysto sida qalabka lagu xiirto, kan cijiyada la'iskaga jaro, kan timmaha lagu shanleysto, iyo kan buraashka lagu cadeesto, hadii aysan ii xanuun iyo istariix daro ii keeneyn.

- I wish to have personal care like shaving, nail clipping, hair brushing, and teeth brushing, as long as they do not cause me pain or discomfort.

- Waxaan jeclaan lahaa in laygu aqriyo ayaado ducaa iyo si cod dheer in lii aqriyo gabayada la jecel yahay.

- I wish to have religious readings and well-loved poems read aloud when I am near death.

- Waxaan jeclaan lahaa in aan wax ka ogaado dalabyadeyda daryeel ee isbitaalka hosbiska ee daaweynta, daryeelkeyga dareen iyo daryeelka nafsadeyda iyo kuwa aan jecelahay.

- I wish to know about options for hospice care to provide medical, emotional and spiritual care for me and my loved ones.

RAJADA 4 — WISH 4

Rajadeyda Sida Aan Rabo In Dadka Ila Dhaqmaan.

My Wish For How I Want People To Treat Me.

(Fadlan qalinka saar wax kasta ee aadan ku raacsaneyn.)

(Please cross out anything that you don't agree with.)

- | | |
|---|---|
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in ay dad ay ila joogaan suurto gal marka ay tahay. Waxaan rabaa in qof ila joogo mar ala markay u ekaato in aan ku dhowahay dhimashada. | <ul style="list-style-type: none">• I wish to have people with me when possible. I want someone to be with me when it seems that death may come at any time. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in gacanteyda layga qabto iyo la'iila hadlo goorta ay suurto galka tahay, xitaa hadii aanan u muuqan aniga in aan jawaab soo celineyn hadal ama taabashaba. | <ul style="list-style-type: none">• I wish to have my hand held and to be talked to when possible, even if I don't seem to respond to the voice or touch of others. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in ay dad dhinaceyga joogaan oo ii duceeya suurta gal hadii ay tahay. | <ul style="list-style-type: none">• I wish to have others by my side praying for me when possible. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in lala socodsiiyo xubnaha beelaha diinteyda in aan xanuunsahay iyo la ii weydiiyo in la ii duceeyo iyo in la isoo booqdo. | <ul style="list-style-type: none">• I wish to have the members of my faith community told that I am sick and asked to pray for me and visit me. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in si naxariis iyo faraxsanaan la ii daryeelo, iyo aanan ahayn si murugo leh. | <ul style="list-style-type: none">• I wish to be cared for with kindness and cheerfulness, and not sadness. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in sawirada kuwa aan jecelahay qolkeyga ku heysto, sariirteyda meel u dhow. | <ul style="list-style-type: none">• I wish to have pictures of my loved ones in my room, near my bed. |
| <ul style="list-style-type: none">• Hadii aanan awoodin in aan xukumo dhaqdhaqaaqa saxarada ama kaadada, waxaan jeclaan lahaa in dharkeyga iyo sariir fidiska mar waliba nadiif ahaadaan, iyo in la bedello sida ugu dhaqsaha badan mar hadii ay qoyyaan. | <ul style="list-style-type: none">• If I am not able to control my bowel or bladder functions, I wish for my clothes and bed linens to be kept clean, and for them to be changed as soon as they can be if they have been soiled. |
| <ul style="list-style-type: none">• Waxaan rabaa in aan gurigeyga ku geeriyoodo, hadii taasi la sameyn karo. | <ul style="list-style-type: none">• I want to die in my home, if that can be done. |

RAJADA 5 — WISH 5

Rajadeyda Waxa Aan Rabo In Dadkeyga Aan Jecel In Ay Ogaadaan. My Wish For What I Want My Loved Ones To Know.

(Fadlan qalinka saar wax kasta ee aadan ku raacsaneyn.)

(Please cross out anything that you don't agree with.)

- | | |
|---|--|
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga iyo saaxiibadeyda ay ogaadaan in aan anigu jecelahay. | <ul style="list-style-type: none">• I wish to have my family and friends know that I love them. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga, saaxiibadeyda, iyo kuwa kale in ay iga cafiyaan mararka aan qalbigooda wax u geestey. | <ul style="list-style-type: none">• I wish to be forgiven for the times I have hurt my family, friends, and others. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga, saaxiibadeyda, iyo kuwa kaleba ay ogaadaan in aan ka cafiyey waxyaabaha ay ii geysteen inta aan anigu noolaa. | <ul style="list-style-type: none">• I wish to have my family, friends and others know that I forgive them for when they may have hurt me in my life. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga, saaxiibadeyda in ay ogaadaan in aan anigu ka baqeyn dhimashada nafteeda. Waxaan u maleynayaa in aysan aheen dhamaadka, balse aniga ii tahay billow. | <ul style="list-style-type: none">• I wish for my family and friends to know that I do not fear death itself. I think it is not the end, but a new beginning for me. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in xubnaha qooskeyga oo dhan inta anigu aanan dhiman ka hor ay wada heshiyaan, hadii ay kari karaan. | <ul style="list-style-type: none">• I wish for all of my family members to make peace with each other before my death, if they can. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga iyo saaxiibadeyda ay ka fakiraan sida aan aniga aahaan jirey inta aanan si xun u xanuunsan. Waxaan rabaa in ay igu xasuustaan sida tan markan dhinto kadib. | <ul style="list-style-type: none">• I wish for my family and friends to think about what I was like before I became seriously ill. I want them to remember me in this way after my death. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga iyo saaxiibadeyda iyo kuwa daryeelka isiiya in ay dhowraan rabitaankeyga xitaa hadii aysan iigu raacsaneyn. | <ul style="list-style-type: none">• I wish for my family and friends and caregivers to respect my wishes even if they don't agree with them. |
| <ul style="list-style-type: none">• Waxaan jeclaan lahaa in qooskeyga iyo saaxiibadeyda in ay dhimashadeyda u arkaan woqti qof kasta wax uga sii kardhi karto, anigana ku jira. Tani waxay ka caawineysaa nolosheyda in maalmaha ugu dambeeya ku noolaada nolol micnaleh. | <ul style="list-style-type: none">• I wish for my family and friends to look at my dying as a time of personal growth for everyone, including me. This will help me live a meaningful life in my final days. |

• Waxaan jeclaan lahaa in qoyskeyga iyo saaxiibadeyda in ay raadsadaan la-taliye hadii ay dhib ka heysto dhimashadeyda.

• I wish for my family and friends to get counseling if they have trouble with my death. I want memories of my life to give them joy and not sorrow.

• Dhimashadeyda ka dib, waxaan jeclahay in jirkeyga (goobaabi mid):
la duugo ama la gubo.

• After my death, I would like my body to be (circle one): buried or cremated.

• Jirkeyga ama waxii ka soo horey waa in la dhigaa goobtan soo socota

• My body or remains should be put in the following location

_____.

_____.

• Shaqsiyaad kan soo socda ayaa og waxaan jeclaan lahaa duugteyda:

• The following person knows my funeral wishes:

_____.

_____.

Hadii qof uu weydiiyo sida anigu doonaayo in leygu soo xusuusto, fadlan dheh sida soo socota:

If anyone asks how I want to be remembered, please say the following about me:

Hadii ay dhacdo in la'iisameeyo goob aniga leygu soo xasuusto, Waxaan jeclaan lahaa in lagu daro sida soo socota (la qoro muusika, heesaha, akhriska ama codsiyada gaarka ah ee aad qabto):

If there is to be a memorial service for me, I wish for this service to include the following (list music, songs, readings or other specific requests that you have):

(Fadlan isticmaal meesha hoose waxyaabaha kale ee aan jeclaan lahaa. Tusaale ahaan, waxaa laga yaabaa markaad dhimato in aad rabto in xubin ama dhamaan jirkaaga oo aad tabarrucdo. Fadlan warqad kale ku lifaaq hadii aad u baahan tahay meel badan ee lagu qoro.)

(Please use the space below for any other wishes. For example, you may want to donate any or all parts of your body when you die. Please attach a separate sheet of paper if you need more space.)

Saxiixida Foomka Shanta Rabitaan

Fadlan hubi in aad foomka Shanta Rabitaan ku saxiixdo labada marqaati ayagoo jooga.

Aniga, _____, waxaan qooskeyga, takhaatiirteyda, iyo shaqaalaha daryeelka caafimaad, saaxiibadeyda, iyo kuwa kale oo dhan aan weydiisanayyaa, in ay raacaan rabitaankeyga sida aan Wakiilkeyga Daryeelka Caafimaad aan ka wada hadalney (hadii aan mid heysto iyo asiga ama ayadu la heli karo), ama sida lagu soo qaatey foomkan. Foomkan wuxuu noqonnayaa mid sharci ah goorta aanan awoodin in aan go'aamo gaaro ama nafteyda aan u hadlo. Hadii qeyb ka mid ah foomkan si sharci ah aanan loo raaci karin, waxaan weydiisanayyaa dhamaan qeybaha kale ee foomkan la raaco. Sidoo kale la baabi' iyo wax kasta oo daryeel caafimaad aan hore u sameeyey jiraan.

Saxiix Signature: _____

Cinwaan Address: _____

Talefoon Phone: _____ Taariikh Date: _____

Qoraalka Marqaatiga (2 marqaati ayaa loo boohan yahay):

Aniga, marqaatiga, aan ku cadeynayaa shaqsiga saxiixey ama foomkan uu ku qirey (hada ka dib "shaqsi") aan shaqsiyan u aqaano, in asiga/ayada horteyda ku saxiixdey ama qirtey foom(am) kan [Wakiilka Daryeelka Caafimaad iyo/ama Dardaaran Noole, iyo in asiga/ayada ila eg yahay miir qabo iyo cabsi ku jirin, beenabuuraya, ama si aan xaq aheyn loogu qalqaliyo.

Sidoo kale waxaan cadeynayaa in aan anigu ka weyn nahay 18 sano jir iyo aanan AHEYN:

- Shaqsiga loo magacaabey (wakiil/wakiil-u-fadhiya/baddel/bukaa u doode/wakiilka u fadhiya) dukumentigaan ama qofta/qofka ka dhaxla,
- Dadka daaweeya qofka, uu ku jiro milkiilaha, ama dhismada ama goobta adeega daryeelka ee beesha ee daaweysa shaqsiga,
- Shaqaalaha goobta daryeelka caafimaadka ee shaqsiga,
- Lacag aan qofka ka mas'uulka ah daryeelka qofka caafimaadkiisa,
- Shaqaalaha ceymiska caafimaad ama nololba ee shaqsiga,
- Dhiig ahaan qaraaba yihiin, guur ahaan, ama soo korsadey, iyo,
- Sida ugu fiican ee aan u ogahay, qaansheegaha shaqsiga ama xaq u lahaanshaha qeyb ka mid ah hantidiisa/hantideeda sida ku qoran dardaaranka ama lagu siyaadiyey, sida sharciga qabo.

(Gobolo qaarkood waxaa laga yaabaa in ay ka yar tahay sharciyadooda ku saabsan qofka marqaatiga noqon kara. Hadii aad ogtahay gobolkaaga sharcigiisa mooyee, fadlan raac sida kore.)

Signing The Five Wishes Form

Please make sure you sign your Five Wishes form in the presence of the two witnesses.

I, _____, ask that my family, my doctors, and other health care providers, my friends, and all others, follow my wishes as communicated by my Health Care Agent (if I have one and he or she is available), or as otherwise expressed in this form. This form becomes valid when I am unable to make decisions or speak for myself. If any part of this form cannot be legally followed, I ask that all other parts of this form be followed. I also revoke any health care advance directives I have made before.

Witness Statement (2 witnesses needed):

I, the witness, declare that the person who signed or acknowledged this form (hereafter "person") is personally known to me, that he/she signed or acknowledged this [Health Care Agent and/or Living Will form(s)] in my presence, and that he/she appears to be of sound mind and under no duress, fraud, or undue influence.

I also declare that I am over 18 years of age and am NOT:

- The individual appointed as (agent/proxy/surrogate/patient advocate/representative) by this document or his/her successor,
- The person's health care provider, including owner or operator of a health, long-term care, or other residential or community care facility serving the person,
- An employee of the person's health care provider,
- Financially responsible for the person's health care,
- An employee of a life or health insurance provider for the person,
- Related to the person by blood, marriage, or adoption, and,
- To the best of my knowledge, a creditor of the person or entitled to any part of his/her estate under a will or codicil, by operation of law.

(Some states may have fewer rules about who may be a witness. Unless you know your state's rules, please follow the above.)

Saxiixa Marqaatiga #1 *Signature of Witness #1*

Magaca Marqaatiga Ee Lagu Daawacey
Printed Name of Witness

Cinwaan *Address*

Telefoon *Phone*

Saxiixa Marqaatiga # 2 *Signature of Witness #2*

Magaca Marqaatiga Ee Lagu Daawacey
Printed Name of Witness

Cinwaan *Address*

Telefoon *Phone*

Nootaaye .
Notarization .

Waxaa looga baahan yahay kuwa degan Missouri, North Carolina, South Carolina iyo West Virginia
Only required for residents of Missouri, North Carolina, South Carolina and West Virginia

- *Hadii aad ku nooshahay Missouri, saxiixaaga kaliya waa in la nooteeyaa.*
- *Hadii aad ku nooshahay North Carolina, South Carolina ama West Virginia, waa in aad saxiixaada ku dhufataa, iyo saxiixa marqaatiyadaada, aadna nooteeysaa.*
- *If you live in Missouri, only your signature should be notarized.*
- *If you live in North Carolina, South Carolina or West Virginia, you should have your signature, and the signatures of your witnesses, notarized.*

STATE OF _____

COUNTY OF _____

On this ____ day of _____, 20____, the said _____, _____, and _____, known to me (or satisfactorily proven) to be the person named in the foregoing instrument and witnesses, respectively, personally appeared before me, a Notary Public, within and for the State and County aforesaid, and acknowledged that they freely and voluntarily executed the same for the purposes stated therein.

My Commission Expires: _____

Notary Public

Dadka degan WISCONSIN waa in ay ku soo lifaaqaan qoraalka ogeysiinta Shanta Rajo ee WISCONSIN. Residents of WISCONSIN must attach the WISCONSIN notice statement to Five Wishes.
Macluumaad dheeri ah iyo qoraalka ogeysiinta waxaad ka heleysaa www.agingwithdignity.org.
More information and the notice statement are available at www.agingwithdignity.org.

Dadka degan Isbitaalada ku yaala CALIFORNIA, CONNECTICUT, DELAWARE, GEORGIA, NEW YORK, NORTH DAKOTA, SOUTH CAROLINA, IYO VERMONT Waa In Ay Raacaan Sharciyada Marqaatiyaasha ee Gaarka ah.
Residents of Institutions In CALIFORNIA, CONNECTICUT, DELAWARE, GEORGIA, NEW YORK, NORTH DAKOTA, SOUTH CAROLINA, AND VERMONT Must Follow Special Witnessing Rules.
Hadii aad ku nooshahay isbitaalada qaar (guriga waayeelka lagu xanaaneeyo, dhismooyin kale ee daryeelka mudada dheer, guryo dadka waalan ama curyaanka aan maskaxda korin, ama isbitaal madaxa kuwa ka jiran) mid ka mid ah gobolada kor lagu soo xusey, waxaa laga yaabaa in aad raacdo “marqaatiyada waxa looga baahan yahay” oo gaarka ah sida Shanta Rabitaan u noqdo mid sharci ah. Macluumaad dheeri ah, fadlan la xiriir shaqaale bulsho ama qofka u dooda bukaaga ee isbitaalakaaga.
If you live in certain institutions (a nursing home, other licensed long term care facility, a home for the mentally retarded or developmentally disabled, or a mental health institution) in one of the states listed above, you may have to follow special “witnessing requirements” for your Five Wishes to be valid. For further information, please contact a social worker or patient advocate at your institution.

Maxaa La Sameeyaa Kadib Markii Aan Dhameystiro Shanta Rabitaan

- *Hubi in aad saxiixdo iyo in marqaati aad u hesho sida foomka uu tilmaamyo. Kadibna Shantaada Rabitaan waxay noqoneysaa mid sharciyeysan iyo ahna mid jirta.*
 - *Rabitaankaaga kala hadal wakiilkaaga daryeelka caafimaad, xubnaha qooskaaga iyo kuwa kale ee adigu ku daryeela. Shanta Rabitaan oo dhameystiran koobigooda sii.*
 - *Koobiga ee aad saxiixdey oo asliga ah adiga meel gaar oo gurigaaga ah ku xifdi. MARNA Ha dhigin sanduuqa qasnada. Agtaada dhigo oo ku xifdi si loo helo marka aad adigu rabto.*
 - *Qeebta kaarka boorsada-jeebka ah ee hoosena buuxi. Mar kasta horey u qaado.*
 - *Dadkaan soo socda waxaan siiyey koobi Shanteyda Rabitaan oo dhameystiran:*
- *Markaa dadku way ogaanayaan halka aad Shanta Rabitaan aad ku xaffidey.*
 - *Takhtarkaaga kala haal goorta xigta ee aad xafiiskiisa booqato. Shanta Rabitaan takhtarkaaga koobi ka sii. Hubi la geliyo rekoorkaaga caafimaad. Iska hubi in takhtarkaaga uu ogyahay adigu waxa aad jeceshahay iyo ogol yahay in uu raaco. Asiga ama ayada weydii in uu u sheego takhaatiirta kale oo adiga ku daaweeya in aay dhowraan.*
 - *Hadii isbitaal lagu seexiyo ama guryaha dadka waaweyn lagu xannaanneeyo, horey u qaado Shanta Rabitaan oo koobi ah. Weydii in ay dhex geliyaan rekorkaaga caafimaad.*
 - *I have given the following people copies of my completed Five Wishes:*

Shanta Rabitaan waxaa loola dan leeyahay in uu kaa caawiyo qorshaha mustaqbalka. Looguma dan laha in talo sharci ku siiyo. Iskuma dayyo in uu ka jawaabo dhamaan su'aalaha imman kara. Shaqsi kasta wuu kala duwan yahay, iyo xaalad kasta way kala duwan tahay. Woqtiba woqtiga ka dambeeya sharciyada way badelmaan. Hadii aad qabti su'aal gaar ah ama dhibaato, la hadal oo kala tasho shaqaale caafimaad ama sharci.

Five Wishes is meant to help you plan for the future. It is not meant to give you legal advice. It does not try to answer all questions about anything that could come up. Every person is different, and every situation is different. Laws change from time to time. If you have a specific question or problem, talk to a medical or legal professional for advice.

Kaarka Boorsad-Jebka Ee Shanta Rabitaan.

*Important Notice to Medical Personnel:
I have a Five Wishes Advance Directive.
Fariin Muhiim ah ee ku socota Shaqaalaha Caafimaad: Waxaan
lee yahay amar-rasmi ah oo hore ee Shanta Rabitaan*

Signature Saxiix

*Please consult this document and/or
my Health Care Agent in an emergency. My Agent is:
Fadlan dokumentigaan iyo/ama Wakiilkeyga Daryeelka Caafimaad kala
tasho hadii ay xaalad deg-deg dhacdo. Wakiilkeygu waa:*

Name Magaca Buuxa

Address Cinwaan/City/State/Zip Magaalda/Gobolka/Sumada Boostada

Phone Talefoon

My primary care physician is:

Takhtarkeyga koowaad waa:

Name Magaca Buuxa

Address Cinwaan/City/State/Zip Magaalda/Gobolka/Sumada Boostada

Phone Talefoon

My document is located at:

Dokumentigeysa wuxuu yaalaa:

Kaarka Ka Jar, Laab iyo Dahaar si loo Dhowro

Halkanna Waa Waxa Shanta Rabitaan Dadka Ay Ka Lee Yihiin:

“Waxaa ka soo wareegatey hal sano markay hooyadeydu dhimatey. Waan ogeyn waxay rabtey maxaa yeeley waxay la’heyd dardaaranka noole ee Shanta Rabitaan. Goorta woqtiga isku soo dhamaadey, walaalkeyga iyo aniga waxaan sameyn laheyn su’aalo kama qabi. Maskaxdeenu way degeneyd.”

Cheryl K.
Longwood, Florida

“Waa in aan irraahdaa waan jecelahay Shantaada Rabitaan. Way caddahay, fahmidaasana waa sahal, iyo iskuma-mashquulinayaan xaalada waaqica jira ee daryeelka caafimaad, balse xaalada dhabta ee muhiimka ah—daryeelka aadmiga. Aniga iyo ninkeyga ayaa isticmaalney.”

Susan W.
Flagstaff, Arizona

“Ma rabo in caruurtayda ay sameeyaan go’aanka aan u sameeyo hooyadey. Marna ma ogeyn in ay jireen dalabyo daaweyn oo kala duwan oo u baahan in laga fikiro. Waad ku mahadsan tihiin foomka daryeelka xasaasiga ah ee ka muuqda. Si sahlan ayaan u karaa in aan buuxiyo oo aan caruurtayda feylka ugu hayyo.”

Diana W.
Hanover, Illinois

Shanta Rajo waxaa abuurey Sharafnimo ku Duqoow, waa urur aanan u shaqeyn in uu faa’ido helo ulajeedadiisana ah in uu dadka ka caawiyo si ay u qorsheeyaan iyo ayna u helaan daryeelka ay u baahan yihiin goorta ay si xun u xanuunsadaan. Soo saarida Shanta Rajo waxaa suurto galiyay deeq ka timid uruka sama-falka ee Robert Wood Johnson.

Five Wishes was created by Aging with Dignity, a nonprofit organization with a mission to help people plan and receive the care they want in case of a serious illness. Development of Five Wishes was made possible by a grant from The Robert Wood Johnson Foundation.

Aging with Dignity

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1-888-594-7437

Turjumaanada Shanta Rajo waxaa suurto geliyey taageero ka timid

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United Health FoundationSM

Adeegyada xirfada turjumaankana waxaa idin soo diyaariyey

Professional translation services provided by

Language Services Associates

Shanta Rabitaan waa sumad ganacsi iska leedahayna Sharafnimo ku Duqoow. Xuquuqda dhamaan way xirran tahay. Daabacaadaan waa koobigeyda waxaa xaquudeeda is leh Sharafnimo ku Duqoow. Lama daamici karo qeyb ka mid ah buuggaan ama loogama gudbin karo nooc kasta ama sabab kasta, elektroonik ama makaanikal, ayadoo taasi ku jirta koobiga, duubitaan, ama keydinta macluumaadka iyo nidaamka soo saarida, ayadoon ogolaansho qoraal ah laga heysan Sharafnimo ku Duqoow. Inta ka kooban dokumentigaan yahay mid xuquudeedu xirran tahay, waxaa lagu fasaxey in aad koobiyeysa si aad u siiso koobiga dhameystiran ee foomka Shanta Rabitaan takhtarkaaga, daryeelahaaga, Wakiilka Daryeelka Caafimaadka, xubnaha qooska, ama kuwa aad jecelahay. Dhamaan dib-udaabacida kale ama isticmaalka Shanta Rabitaan waxaad u baahan tahay in aad ogolaansho ka heysato Sharafnimo ku Duqoow. Ururka Sharafnimo ku Duqoow wuxuu jeclaan lahaa inuu u mahad celiyo Go’aamada Caafimaadka ee Oregon ku soo darita qoraalka lambarka labada ee rabitaanka.

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