

Upload Your Advance Care Plan to MyChart

Advance care planning is the process of taking time to decide what is important to you and what you want for your future medical care. Having an advance care plan is important when you cannot make health care decisions because of an accident or illness.

An Advance Care Plan is for **adults at any age over 18** at any stage of health. Your advance care plan can change as goals and values change over your lifetime. For more information and a copy of our **Advance Care Planning Guide**, go to www.uchicagomedicine.org/advancecareplanning.

Be sure to share your Healthcare Power of Attorney (HPOA) form with your care team.

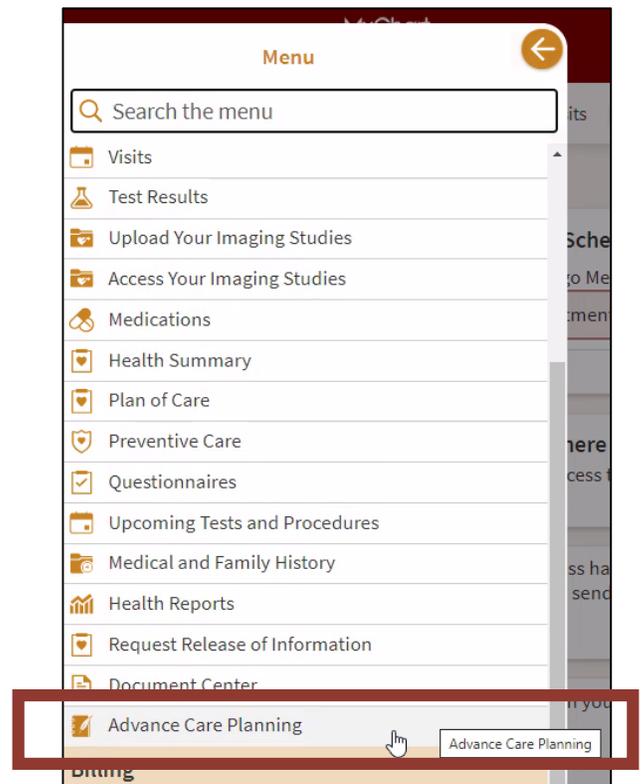
Follow these easy steps to:

- Add Advance Care Planning documents (HPOA)
- Edit contact information for a Health Care Decision Maker
- Find resources on MyChart

Step 1

Log into your MyChart account.

From the Main Menu,
select Advance Care Planning



Upload Your Advance Care Plan to MyChart

Step 2

Complete and sign an Illinois Power of Attorney for Health Care Form.

You can use one of the forms found under the Helpful Resources section. The UChicago Medicine version is written in plain everyday language that is easier to read and understand. Both forms are legal and okay to use.

Helpful Resources
These resources will help you make care decisions and prepare for conversations with your family, friends, and doctors.

- Quick Guide to Healthcare Power of Attorney**
This one-page guide provides a quick overview of what you need to know about completing a Healthcare Power of Attorney form in Illinois and choosing a medical decision maker.
- Illinois Power of Attorney for Health Care Form (IDPH)**
This is the Power of Attorney for Health Care form from the Illinois Department of Public Health. It is free to complete and does not need to be notarized. If you are a non-Illinois resident but receive care at UCM in Illinois, you can use this form if you don't already have a Health Care Power of Attorney for your state.
- Illinois Power of Attorney for Health Care Form - Plain language version**
This form created at UChicago Medicine is an acceptable, legal alternative to the Illinois Power of Attorney for Health Care Form, but may be easier to read with larger text and less words.

Step 3

Add your Health Care Decision Maker

who can make health care decisions for you when you cannot.

To start, click **Add Health Decision Maker**.

Health Care Decision Maker ⓘ

You currently have no health care decision maker.

Add Health Care Decision Maker

Designate one or more health care decision makers who can make health care decisions for you when you cannot. Upload a signed Power of Attorney for Health Care Form (available under Helpful Resources) when submitting.

Step 4

Select your Health Care Decision Maker.

You can choose a person who is already listed as your emergency contact or you can add a new person

Select **Add a new person** if this is someone new.

Health Care Decision Maker ⓘ

You currently have no health care decision maker.

New Health Care Decision Maker

Health Care Decision Maker

Select someone to be your Health Care Decision Maker

Select someone to be your Health Care Decision Maker

Anthony Smith (PARTNER)

-- Add a new person --

Upload Your Advance Care Plan to MyChart

Step 5

If you are adding a new person, enter their first name and last name. Add their relationship to you.

Then, **add your decision maker relationship.**

Select if this person is your:

- Health Care Decision Maker
- Successor Health Care Decision Maker #1
- Successor Health Care Decision Maker #2
- Surrogate Decision Maker

This needs to match what is listed in your Health Care Power of Attorney form.

Health Care Decision Maker ⓘ

You currently have no health care decision maker.

New Health Care Decision Maker

*Health Care Decision Maker
-- Add a new person --

*First Name
Last Name

Relationship

Legal document for this relationship

Country
United States

Street Address

City State ZIP

County

Home Phone Mobile Phone

Work Phone Email

Save changes Cancel

Step 6

Upload the completed and signed Health Care Power of Attorney form that lists this person as your Health Care Decision Maker.

Click on the document icon to upload a signed HPOA form. Your HPOA form can be a photo or a PDF document.

Health Care Decision Maker ⓘ

You currently have no health care decision maker.

New Health Care Decision Maker

*Health Care Decision Maker
-- Add a new person --

*First Name Nancy Last Name Jones

Relationship WIFE *Decision Maker Relationship Health Care Decision Mak...

Legal document for this relationship

Upload document

Upload Your Advance Care Plan to MyChart

Step 7

After you upload the document, make sure it is listed under **Documents In Review**.

The screenshot shows the MyChart interface for UChicago Medicine. The 'Documents On File' section is empty. The 'Documents In Review' section is highlighted with a red box and contains a document titled 'powerofattorneyhealthcareform.pdf' with an 'In review' button. Below this, a note states: 'Common documents include Advance Directives and Living Will, a Power of Attorney, or a Physician Orders for Life-Sustaining Treatment (POLST) signed by your physician.'

Step 8

Enter the rest of the information needed for your Health Care Decision Maker.

Select **Save Changes** at the bottom.

This screenshot shows the bottom portion of the form where contact information is entered. The 'Save changes' button is highlighted with a red box. The form fields include: Country (United States), Street Address (555 Oak Ave), City (Chicago), State (Illinois), ZIP (60610), County (COOK), Home Phone (7737021220), Mobile Phone, Work Phone, and Email (email@email.com). A note at the bottom reads: 'Your changes to the Decision Maker Relationship and/or attached Legal Document will be accepted pending our review.'

Step 9

Our team will review the information you have added to make sure it is complete. If something is missing, you will get a notice saying the reason it was not accepted.

You can upload the corrected document or contact information, or send us a message if you have questions.

This screenshot shows a notification for a 'Not Accepted Documents' section. The notification is highlighted with a red box and contains the following text: 'POA.pdf', 'Uploaded on 8/2/2021', and 'Dear Patient, We are not able to accept this POA document, due to a missing witness signature. Please revise and re-upload.' The notification also includes an 'Accepted' button and a 'Not accepted' button. The background shows the 'Health Care Decision Maker' information for Nancy Jones (WIFE) and the 'Planning Documents' section.