

LE GOUVERNEMENT DU GRAND-DUCHÉ DE LUXEMBOURG Service national d'information et de médiation dans le domaine de la santé



## Designation of a person of trust

(Article 12 of the law of 24 July 2014 on patients' rights and obligations)

Mrs / Mr:			
Matricule (CNS):			
Born:in			
Address:			
I hereby designate the following person <sup>1</sup> as my person of trust / healthcare surrogate ('personne de confiance') who expresses my will in case I am no longer able to express myself and receive the information necessary to take health-related decisions:			
Mrs / Mr:			
Born:in			
Address: Phone number : E-mail:			
My person of trust will be able to express my wishes, receive information about my state of health and obtain access to my patient file. Professional secrecy cannot be invoked against him/her.			
This designation also applies if I am at the end of my life <sup>2</sup> and no longer able to express myself, unless I decide otherwise. Opposition and/or personal comments			
I designate my person of trust as my mandate/proxy <sup>3</sup> , who will be able to receive information about my state of health and obtain access to my patient file even when I am still able to express my will and receive information about my health myself: $\Box$ Yes $\Box$ No			
Personal comments:			

.....

The two witnesses below certify that the patient, although able to express his wishes, is unable to write and sign her/himself and that the designation recorded in this document is the expression of her/ his free and informed wishes.

## Witness 1:

Mrs / Mr:	
	in
Adress:	
Phone number :	
E-mail	

## Witness 2:

Mrs / Mr:	
Relationship	
Born:	in
Adress:	
Phone number :	
E-mail	

The two witnesses attest that the document that the patient was unable to draw up himself is the expression of his/ her free and informed wishes.

Done in Luxembourg.......in......copies<sup>4</sup>.

.....

Signature

<sup>1</sup> Your person of trust does not have to give his prior consent. We recommend discussing the designation with the person of trust, in order to be sure that he or she is willing and able to be your representative and is informed about your wishes and values. The designation can be revoked (cancelled or changed) at any time, preferably in written, dated and signed. It is important to inform the persons who are in possession of a revoked or cancelled designation (revoked person of trust; physician, etc.) and to update your DSP, to avoid any misunderstanding.

<sup>2</sup> Unless you express a wish to the contrary, the designation of a person of trust in accordance with the law of 24 July 2014 also applies in an end-of-life situation within the meaning of the law of 16 March 2009 on palliative care, advance directive and support at the end-of-life, and within the meaning of the law of 16 March 2009 on euthanasia and assisted suicide. Similarly, if you have already designated a person of trust under one of the aforementioned laws of 16 March 2009, that person of trust also acts as a person of trust under the law of 24 July 2014 on patients' rights and obligations, unless you express a wish to the contrary. You do not therefore need to designate your person of trust more than once, unless you wish to designate different people. If you have decided to designate a different person, for example in your end-of-life provision (euthanasia), you can specify this in this section.

<sup>3</sup> By designating a person of trust, you determine the representative for health care providers in the case that you are no longer able to express your wishes or receive the information necessary to take a decision about your health.

By ticking the relevant box with "yes", you further confer a mandate allowing the person of trust to be generally informed about your health issues as your proxy (art. 16 (2) paragraph 2 of the law of 24 July 2014 on the rights and obligations of the patient). It will therefore be able to request your patient file and communicate with the doctor or other service provider, even if you can still decide for yourself.

<sup>4</sup> It is recommended that you draw up the document designating your person of trust in at least three copies: one copy for your documentation, one copy for the physician to be attached to the patient file and one copy for the person of trust you have designated.

There is no specific national register of designations. If you have a shared care file (Dossier de soins partagé - DSP), you can enter the designation of your person of trust in your personal expression space to make it easier for the healthcare professionals involved in your care to consult this information. More information on the DSP is available at the eSanté Agency: <a href="https://www.esante.lu">www.esante.lu</a> / Tel: (+352) 2712 5018 33.