

**The University of Chicago and
The University of Chicago Medical Center
HEALTH CARE SURROGATE ACT
CERTIFICATION
CONCERNING RESEARCH**

1. To the best of my knowledge, the patient/subject (name) _____ does not have a Durable Power of Attorney for Health Care, a Living Will, or Declaration for Mental Health Treatment that applies to the patient's condition and the decision to participate in this research.

After personally examining the patient named above, I have determined to a reasonable degree of medical certainty that the patient lacks decisional capacity to make decisions about this research. The cause, nature and duration of the lack of decisional capacity is summarized as follows:

2. If possible, the patient has been informed and has not objected to the above determinations, the identity of the surrogate decision maker, and the decision made by the surrogate. The proposed research and the factors to be considered by the surrogate decision maker have been discussed with the surrogate and he/she has demonstrated understanding and willingness to make the decision in accordance with such factors. The decision of the surrogate is reflected in the attached surrogate consent form.

Attending Physician: _____
Date

I concur in the determination that the patient named above lacks decisional capacity.

Concurring Physician*: _____
Date
**(MUST be a physician not involved in this project)*

Surrogate Decision Maker: Name
Address
Telephone () _____
() _____
Relationship to Patient/Subject

I have witnessed the discussion between the attending physician and surrogate decision maker and the decision expressed by the surrogate on behalf of the patient named above.

Witness Date

See Reverse Side for definitions under Illinois Health Care Surrogate Act and factors to be considered by the surrogate.

This form should be placed in the subject's medical record and a copy attached to the research consent form, or if no written consent form is required, kept with the subject's research records.

DEFINITIONS:

“Decisional Capacity” means the ability to understand and appreciate the nature and consequences of a decision regarding research and the ability to reach and communicate an informed decision in the matter as determined by the attending physician.

“Surrogate Decision Maker” means an adult individual or individuals who (i) have decisional capacity, (ii) are available upon reasonable inquiry; (iii) are willing to make medical treatment decisions on behalf of a patient who lacks decisional capacity, and (iv) are identified by the attending physician in accordance with the provisions of this Act in the following order of priority: (1) the patient’s guardian of the person; (2) the patient’s spouse; (3) any adult son or daughter of the patient; (4) either parent of the patient; any adult brother or sister of the patient; (6) any adult grandchild of the patient; (7) a close friend of the patient; (8) the patient’s guardian of the estate.

“Close Friend” means any person 18 years of age or older who has exhibited special care and concern for the patient and who presents an affidavit to the attending physician stating that he or she (i) is a close friend of the patient, (ii) is willing and able to become involved in the patient’s health care, and (iii) has maintained such regular contact with the patient as to be familiar with the patient’s activities, health, and religious and moral beliefs. The affidavit must also state facts and circumstances that demonstrate that familiarity.

FACTORS TO BE CONSIDERED BY SURROGATE DECISION MAKER:

The surrogate shall make a decision for an adult patient conforming as closely as possible to what the patient would have done or intended under the circumstances, taking into account evidence that includes, but is not limited to, the patient’s personal, philosophical, religious and moral beliefs and ethical values relative to the purpose of life, sickness, medical procedures, suffering, and death. An unrevoked advance directive, such as a Living Will, Durable Power of Attorney for Health Care, or Declaration for Mental Health Treatment that is no longer valid due to a technical deficiency or is not applicable to the patient’s condition may be used as evidence of a patient’s wishes.

If the adult patient’s wishes are unknown and remain unknown after reasonable efforts to discern them, or if the patient is a minor, the decision shall be made on the basis of the patient’s best interests as determined by the surrogate. In determining the patient’s best interests, the surrogate shall weigh the benefits to the patient of initiation or continuing the research against the burdens and risks of the research and shall take into account any other information, including the view of family and friends, that the surrogate believes the patient would have considered if able to act for herself or himself.