



TEN SENIOR ESSENTIALS

Vieve Health One-Page Checklist

1. _____ Durable Power of Attorney
2. _____ Durable Power of Attorney for Health Care Decisions
3. _____ DNR copy of DO NOT RESESITATE form if applicable
4. _____ End-of-Life Plan – including Hospice, Memorial/Funeral
5. _____ Living Trust and Last Will & Testament
6. _____ Life Insurance and/or Long-Term Care Insurance
7. _____ Medicare and Medicare Supplemental Insurance (Part B)
8. _____ Retirement investments, Financial Planning
9. _____ Long-Term Care wishes – age-in-place or assisted living/residential facility
10. _____ List of doctors, specialists, list of medications and recent health history