

~~(B) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, ANY OF THE SURROGATE DECISION MAKERS IDENTIFIED IN SUBSECTION (C) OF THIS SECTION, IN THE ORDER OF PRIORITY SHOWN IN THAT SUBSECTION, MAY MAKE A HEALTH CARE DECISION FOR AN INCAPACITATED INDIVIDUAL.~~

~~(C) THE SURROGATE DECISION MAKERS WHO MAY EXERCISE THE AUTHORITY GRANTED BY SUBSECTION (B) OF THIS SECTION ARE:~~

~~(1) THE SPOUSE OF THE INDIVIDUAL;~~

~~(2) IF THE SPOUSE OF THE INDIVIDUAL IS UNAVAILABLE, ANY OF THE ADULT CHILDREN OF THE INDIVIDUAL;~~

~~(3) IF ALL OF THE ADULT CHILDREN OF THE INDIVIDUAL ARE UNAVAILABLE, EITHER OF THE PARENTS OF THE INDIVIDUAL;~~

~~(4) IF BOTH OF THE PARENTS OF THE INDIVIDUAL ARE UNAVAILABLE, ANY OF THE ADULT SIBLINGS OF THE INDIVIDUAL;~~

~~(5) IF ALL OF THE ADULT SIBLINGS OF THE INDIVIDUAL ARE UNAVAILABLE, EITHER OF THE GRANDPARENTS OF THE INDIVIDUAL;~~

~~(6) IF BOTH OF THE GRANDPARENTS OF THE INDIVIDUAL ARE UNAVAILABLE, ANY ADULT GRANDCHILD, ADULT AUNT OR UNCLE, ADULT NIECE OR NEPHEW, OR ADULT COUSIN OF THE INDIVIDUAL WHO PRESENTS TO THE ATTENDING PHYSICIAN OF THE INCAPACITATED INDIVIDUAL AN AFFIDAVIT ATTESTING THAT THE AFFIANT:~~

~~(I) HAS EXHIBITED SPECIAL CARE AND CONCERN FOR THE INDIVIDUAL;~~

~~(II) IS FAMILIAR WITH THE PERSONAL AFFAIRS, MEDICAL CONDITION AND VALUES OF THE INDIVIDUAL THROUGH REGULAR CONTACT; AND~~

~~(III) IS WILLING AND ABLE TO MAKE DECISIONS REGARDING THE HEALTH CARE OF THE INDIVIDUAL; OR~~

~~(7) IF ALL OTHER SURROGATE DECISION MAKERS ARE UNAVAILABLE, ANY ADULT WHO PRESENTS TO THE ATTENDING PHYSICIAN OF THE INDIVIDUAL AN AFFIDAVIT ATTESTING THAT THE AFFIANT:~~

~~(I) HAS KNOWN THE INDIVIDUAL FOR AT LEAST 2 YEARS;~~

~~(II) HAS EXHIBITED SPECIAL CARE AND CONCERN FOR THE INDIVIDUAL;~~

~~(III) IS FAMILIAR WITH THE PERSONAL AFFAIRS, MEDICAL CONDITION, AND VALUES OF THE INDIVIDUAL THROUGH REGULAR CONTACT; AND~~

~~(IV) IS WILLING AND ABLE TO MAKE DECISIONS REGARDING THE HEALTH CARE OF THE INDIVIDUAL.~~