- (3) Shall be signed by:
 - (i) The patient if the patient is a competent individual; or
- (ii) If the patient is incapable of making an informed decision, a health care agent or surrogate decision maker as authorized by this subtitle;
- (4) If signed by the patient in accordance with item (3)(i) of this subsection, shall include contact information for the patient's health care agent;
- (5) If signed by a health care agent or surrogate decision maker in accordance with item (3)(ii) of this subsection, shall include contact information for the health care agent or surrogate decision maker;
 - (6) Shall be dated;
- (7) Shall include a statement that the form may be reviewed, modified, or rescinded at any time;
- (8) Shall designate under which conditions the form must be reviewed or modified, including promptly after the patient becomes incapable of making an informed decision; and
- (9) Shall contain a conspicuous statement that the original form shall accompany the individual when the individual is transferred to another health care provider or discharged.
- (d) A health care provider shall review any ["Patient's Plan of Care"] "INSTRUCTIONS ON CURRENT LIFE-SUSTAINING TREATMENT OPTIONS" form received from another health care provider as part of the process of establishing a plan of care for an individual.
- (e) The Office of the Attorney General, in developing the ["Patient's Plan of Care"] "INSTRUCTIONS ON CURRENT LIFE-SUSTAINING TREATMENT OPTIONS" form in accordance with subsection (a) of this section, shall consult with:
 - (1) The Department;
- (2) Religious groups and institutions with an interest in end-of-life care;
- (3) One or more representatives from the community of individuals with disabilities; and