Hema A. Murthy

Professor

Dept. of Computer Science & Engineering Indian Institute of Technology Madras Chennai 600 036, India

August 2, 2020

To Whomosover it may Concern

 Sir

Subject: My living will

This living will has been drafted on the 31st Day of July, 2019 by me, Hema A Murthy daughter of N V Arunachalam, currently residing at plot 33/4 Ramappa Nagar Main Road, Perungudi, Chennai 600096, Tamil Nadu, India. This will is addressed to my family, friends and any doctor who may attend on me.

I have drafted this will in a state of sound mind and good health. I am mentally, emotionally and legally competent to make this living will and I fully understand its import. In the event of my illness: If I become ill, and am not mentally sound to make a decision, I DO NOT want to be subjected to any of the following procedures:

- 1. Cardiopulmonary resuscitation (CPR)
- 2. Endotracheal intubation
- 3. Mechanical/electrical ventilator
- 4. De-fibrillation
- 5. Feeding tube
- 6. Parenteral nutrition (feeding only through IV fluid)
- 7. Angioplasty or bypass surgery
- 8. Blood transfusion
- 9. Dialysis
- 10. Chemotherapy
- 11. Radiation

I request the physicians attending me to honour this wish. I accept the consequences.

In the event of my being brain dead:

In the event of my being brain dead I wish to donate my organs. On my death: I wish to donate my eyes, and any other parts that may be useful for humanity. Whatever is left may be donated for medical research. IN WITNESS WHEREOF, I have hereto set my hand and seal this 31st day of July, 2019.

Signed:

[) James

Declaration of Witnesses:

The declarant is personally known to me and I believe her to be of sound mind and emotionally and legally competent to make the herein contained Directive to Physicians. I am not related to the declarant by blood or marriage, nor would I be entitled to any portion of the declarant's estate upon her decease, nor am I an attending physician of the declarant, nor an employee of the attending physician, nor an employee of a health care facility in which the declarant is a patient, nor a patient in a health care facility in which the declarant is a patient, nor am I a person who has any claim against any portion of the estate of the declarant upon her death.

Witness 1: Signed: (M Nathiya) – signned the hardcopy

Witness 2: Signed: (Jeena J Prakash) – signed the hardcopy

Sincerely,

J Herne

Hema A. Murthy