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Sat, 16 Jun 2018 04:32:00 GMT - PART 2: HEALTH-CARE POWER OF ATTORNEY AGENTâ€™S AUTHORITY AND OBLIGATION My agent shall make health-care decisions for me in accordance with my best interests and wishes so far as they are known.

A HEALTH CARE DIRECTIVE FORM - Hawaii Department of Health -

Tue, 19 Jun 2018 19:37:00 GMT - DEPARTMENT OF HEALTH Repeal of State of Hawaii Public Health Regulations â€™Rules of Practice and Procedureâ€™