

STATE OF MICHIGAN PROBATE COURT COUNTY	ACCEPTANCE OF APPOINTMENT AND REPORT OF GUARDIAN AD LITEM OF ALLEGED INCAPACITATED INDIVIDUAL	CASE NO. and JUDGE
--	---	--------------------

Court address

Court telephone no.

In the matter of _____
First, middle, and last name of the alleged incapacitated individual

1. I have been appointed by the court as guardian ad litem, and I accept this appointment.
2. I have performed the duties required by statute (see next page for list of duties).

3. I visited the alleged incapacitated individual on _____ at _____
Date _____ Location _____

and, to the extent that the individual could comprehend, explained the nature, purpose, and legal effects of a guardian's appointment and otherwise complied with each provision of MCL 700.5305(1).

4. I report to the court as follows:

a. the alleged incapacitated individual wishes to:

- have limits placed on the guardian's powers
 do-not-resuscitate order. POST (physician orders for scope of treatment) form. other.
 contest the petition.
 object to the appointment of the nominated guardian or designation of standby guardian.
 have an attorney appointed.

b. There is a disagreement or dispute related to the guardianship, namely _____

I believe it might will not be resolved through court-ordered mediation.

c. There is one or more appropriate alternative to a full guardianship, namely:

1) appointment of a limited guardian with the following powers: _____

2) appointment of a conservator or a written protective order.

3) the alleged legally incapacitated individual executing one of the following:

- a patient advocate designation. a do-not-resuscitate declaration.
 a durable power of attorney. a physician orders for scope of treatment (POST) form.

d. The alleged incapacitated individual wishes to be present at the hearing.

e. I believe it is in the best interests of the individual to have legal counsel because _____

The individual will retain legal counsel. I recommend the court appoint legal counsel.

5. None of the items in item 4a above is demanded. My report to the court and recommendations are attached.

Date _____

Signature _____

Address _____

Name (type or print) _____

City, state, zip _____

Telephone no. _____

Your **duties** as guardian ad litem include all the following:

1. Personally visit the individual alleged to be incapacitated.
2. Explain to the individual the nature, purpose, and legal effects of the appointment of a guardian.
3. Give the individual form PC 626 that outlines the rights in MCL 700.5306a(1).
4. Inform the individual that if a guardian is appointed, the guardian may have the power to execute a do-not-resuscitate order and/or physician orders for scope of treatment (POST) form on behalf of the individual.
5. Explain to the individual the hearing procedure and the individual's rights in the hearing procedure, including but not limited to:
 - a. the right to contest the petition.
 - b. the right to request limits on the guardian's powers, including a limitation on the power to execute a do-not-resuscitate order and/or a physician orders for scope of treatment (POST) form on behalf of the individual.
 - c. the right to object to a particular person being appointed guardian or designated as standby guardian.
 - d. the right to be present at the hearing.
 - e. the right to be represented by legal counsel.
 - f. the right to have legal counsel appointed if the individual is unable to afford legal counsel.
6. Inform the individual of the name of any person known to be seeking appointment as guardian or designation as standby guardian.
7. Ask the individual and the petitioner about the amount of cash and property readily convertible into cash that is in the individual's estate.
8. **Make determinations and inform the court** of those determinations, on all the following:
 - a. whether the individual alleged to be incapacitated wishes to be present at the hearing.
 - b. whether the individual alleged to be incapacitated wishes to contest the petition.
 - c. whether the individual alleged to be incapacitated wishes limits be placed on the guardian's powers.
 - d. whether the individual alleged to be incapacitated objects to having a do-not-resuscitate order and/or physician orders for scope of treatment (POST) form executed on their behalf.
 - e. whether the individual alleged to be incapacitated objects to a particular person being appointed guardian or designated as standby guardian.
 - f. whether there is one or more appropriate alternatives to the appointment of a full guardian or whether other action should be taken in addition to the appointment of a guardian after considering:
 - i. appointment of a limited guardian, including the specific powers and limitation on those powers the guardian ad litem believes appropriate.
 - ii. appointment of a conservator or another protective order under MCL 700.5401 *et seq.*
 - iii. execution of a patient advocate designation, do-not-resuscitate declaration, physician orders for scope of treatment form, or durable power of attorney with or without limitations on purpose, authority, or duration.
 - iv. available support from family members. Family members may often take responsibility for the care of an individual. Also, if the individual should be diagnosed as having a reduced life expectancy because of an advanced illness, state law allows a member of the individual's immediate family or next of kin to make informed decisions regarding the individual receiving, continuing, discontinuing and refusing medical treatment and may choose palliative treatment and adequate and appropriate pain and symptom management.
 - g. whether a disagreement or dispute related to the guardianship petition might be resolved through court-ordered mediation.

In the report informing the court of the determinations, include an estimate of the amount of cash and property readily convertible that is in the individual's estate.