

Thinking about your Future Health Care

Think through these questions about your future health care on the following pages.

Take notes of your thoughts so that you can discuss what's important to you, with others.

*NB. You can either **type** in your notes and save this document to your computer, or print it so you can **write** in your notes.*





Thinking about... your quality of life

What matters to you?

1. What is important to you, what do you value most?

2. At present, what brings you pleasure and joy? What makes life worth living for you? What would you miss most if you couldn't live as you do currently? ...if you couldn't walk, talk, eat or think normally?

Health and medical care

3. Do you have any major health problems at the moment? Will these get worse? How will this affect the rest of your life?

How do any medical treatments you are having now affect the way you live? How will they affect you in the future?

Do you know what medical treatment decisions you may face? Yes No Unsure

4. Has anything happened in your past to influence your feelings about medical treatments?

5. What medical problems do you think you might have in the future?





Decision-making

6. How much do you want to know about what might happen in the future with your health and well being?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I only want to know the basics</i>						<i>I want to know as much as I can about my possible future health and treatments</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I do not want to know that I am near the end of my life</i>						<i>I want to know how long I have to live and the quality of that time</i>

7. How involved do you want to be in treatment decisions?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I want my healthcare team to do what they think best</i>						<i>I want a say in every decision</i>

8. If you couldn't speak, who would you want to speak for you? Have you told them what you would want?

9. How involved do you want your loved ones to be?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I don't want them knowing everything about my health</i>						<i>I am comfortable for them to know everything about my health</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I want them to respect my wishes, even if they do not agree</i>						<i>I want them to do what brings them peace, even if it goes against my wishes</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>I don't want my loved ones to see me die</i>						<i>I want to be surrounded by my loved ones</i>

10. Any other thoughts about your quality of life?





Thinking about... the end of your life

Nearing end of life

1. Think about a time when someone close to you was very ill or dying. What was positive about that? What do you wish had been done differently?

2. What do you need to do or say before you die?

End of life treatments

3. What kinds of treatment would you want, or not want?

4. Would you prefer to live as long as possible, no matter what, or is quality of life more important than quantity?

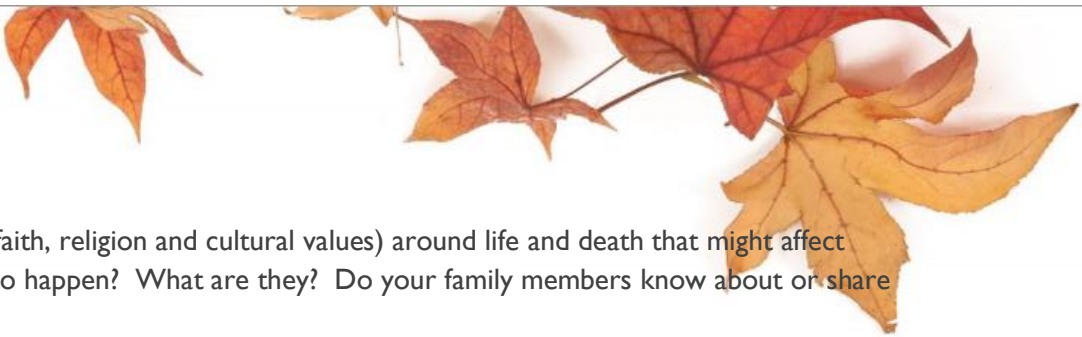
5. Do you worry that you might not get enough treatment or that you might get overly aggressive treatments?

In the event of a serious illness or injury, there are a number of procedures that can prolong life or delay death. For example:

- *Cardio-pulmonary resuscitation (CPR)*
- *Artificial breathing using a machine*
- *Tube feeding*
- *Artificial hydration (intravenous)*
- *Kidney dialysis.*

6. Do you know in which circumstances you would want the goal of medical care to switch from *prolonging your life to keeping you comfortable (pain relief, physical comfort, caring support)*?





7. Do you have beliefs (faith, religion and cultural values) around life and death that might affect what you would like to happen? What are they? Do your family members know about or share your beliefs?

Last days

8. Where would you prefer to spend your last few weeks, or days? What would be your ideal surroundings? How could this happen?

9. What kind of spiritual care do you want at the end of your life? (eg. someone from your faith to be present, prayers at your bedside)

10. How do you feel about donating organs (eg. heart, kidney) or tissues (eg. eyes, heart valves, skin)?

11. When you think about dying, are there situations that worry you?

After passing

12. Would you prefer to be buried or cremated? Where would you like your last resting place to be? Do you have any preferences for your funeral / tangi?

13. Any other thoughts about the end of your life?



Once you've finished all your initial Thinking, you'll be ready for the Talking stage.