

CONVERSATION STARTER KIT (CONDENSED)

CARE	PLANNIN	<u> </u>								
NAME					DATE					
wis hel _l enc to a dov	hes for e p you get courage y convers vnload th	nd-of-life started v ou to use ation. You se full ver	e care. W with what this tool u may wi sion of th	l to identi sh to visit	ed the Co can be c fy your va thecon Kit that o	onversati hallengin alues. It o versation comes co	on Starte ng discus an serve aproject.complete v	er Kit to ssions. Wo as a guid org and with helpf	e	
When	should v	ou have	the conv	ersation?	•					
Even if you	u're in good h one's health s	nealth, it's still status can cha	important to	make sure yo v. It's particula	our loved ones	to have the co	onversation if	m, know your f you or a loved d what matter	d one has	
(For ex		ble to recognize		o me at the e		nursing care; be	eing able to say	goodbye to the o	nes I love.)	
			nts your wish	es. (You can w	rite on the do	tted line belo	ow each scale	if you'd like to	explain	
or add notes about your answer.) As a patient, I'd like to know					If I had a terminal illness, I would prefer to					
1	2	3	4	5	1	2	3	4	5	
Only the basics about my condition and my treatment		All the details about my condition and my treatment		Not know how quickly it is progressing			Know my doctor's best estimation for how long I have to live			
•••••				• • • • • • • • • • • • • • • • • • • •	•••••				• • • • • • • • • • • • • • • • • • • •	
As doctor	rs treat me,	l would like			How long do you want to receive medical care?					
\bigcirc 1	2	○ 3	4	5	\bigcirc 1	2	○ 3	4	5	
My doctors what they t is best				To have a say in every decision	Indefinitely how uncon treatments			more in	lity of life is nportant to an quantity	

What are	your conce	rns about tre	eatment?		How involved do you want your loved ones to be?					
\bigcirc 1	2	○ 3	4	5	\bigcirc 1	2	\bigcirc 3	4	5	
I'm worried I'm worried that that I won't get I'll get overly enough care aggressive care			'll get overly	I want my loved ones to do exactly what I've said, even if it makes them a little uncomfortable			I want my loved ones to do what brings them peace, even if it goes against what I've said			
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What are your preferences about where you want to be?					When it comes to sharing information					
\bigcirc 1	2	3	4	5	\bigcirc 1	2	○ 3	\bigcirc 4	5	
I wouldn't mind I want to spend my last spending my last days in a health care facility I want to spend my last days at home			I don't want my loved ones to know everything about my health I am comfortable with those close to me knowing everything about my health							
	_			-	-	t able to? (Thi	-			
			Attorney (MD dvancedirect	_	nt, in the Sta	te of Colorado	o. More inf	ormation is		
? Do y	ou have any	particular c	oncerns (que	stions, fears)	about your	health? About	the last p	hase of your li	fe?	
	•			ortant things ferences for	•	•	s, family, a	nd/or doctors		
1										
2										
3										
		Instituto	for							





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