

## Exploring Your Values and Preferences about Death and Dying

1. When the time comes for you to face your own dying process and death, what is most important to you? (Check as many as you want)

### Regarding relationships:

- ☐ I want quality time with family and friends before I die.
- ☐ I want an opportunity to achieve peace/resolution in relationships.
- ☐ I do not want to be a burden to my family and friends.
- ☐ I want to be independent--- to live on my own and care for myself as long as possible.
- ☐ I want to be able to be with my pet(s), specifically \_\_\_\_\_.
- ☐ Although I want to have quality time with family and friends *before* I die, when the time comes for me to actually die, I think I would prefer to be alone.
- ☐ At the moment of my death, I think I would prefer to be surrounded by my loved ones.
- ☐ I'm fine with my loved ones knowing the details of my medical condition and treatment.
- ☐ I'd prefer not to share details of my medical condition and treatment with my loved ones.

### Regarding location:

- ☐ I want to die at home, rather than in a medical care facility.
- ☐ I'd feel more comfortable dying in a medical care facility.

### Regarding religious traditions:

- ☐ It is important to me at the end of my life that I engage in religious traditions and follow religious guidelines, such as: \_\_\_\_\_

### Regarding activities:

- ☐ In my last days or weeks, it is important to me to be able to engage in hobbies or activities that I enjoy, such as: \_\_\_\_\_

### Regarding pain and medical treatment:

- ☐ It is important to me to avoid pain (even if that means I may be drowsy or asleep).
- ☐ It is important to me to be conscious for periods of time each day (even if that means I may be in more pain).
- ☐ I want to try to live as long as possible, even if the quality of my life is lowered by the medical treatments.
- ☐ I want my medical care to focus on the quality of my life and comfort, even if this makes my life shorter.
- ☐ Other (For example, I want to live long enough to do X, but then switch to quality of life as the focus after X occurs): \_\_\_\_\_

1. What are you most worried about when you think about your own dying process? (Check all that apply)

- ☐ I'm worried about not getting access to the medical care I need.
- ☐ I'm worried about receiving overly aggressive care.
- ☐ I'm worried about being in pain.
- ☐ I'm worried about being alone.
- ☐ I'm worried about being a burden to others.
- ☐ I'm worried about loss of control.
- ☐ I'm worried about loss of dignity.
- ☐ Other: \_\_\_\_\_

2. Are there medical situations in which you believe your life would NOT be worth living?

- ☐ No, I think life is always worth living.
- ☐ Yes, there are some situations in which my life would not be worth living, such as
  - ☐ Being permanently unconscious.
  - ☐ Depending on a machine such as a respirator or \_\_\_\_\_ for life if it seems unlikely I will ever be able to live without those machine aids.
  - ☐ No longer being able to engage in activities that are important to me, such as \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

3. Look over your previous answers. What are the **three** most important things you want your loved ones to know about your preferences and values at the end of life?

1.

2.

3.

*This document was created by Sarah Roberts-Cady. Many of the ideas for this worksheet were inspired by other great resources on death and dying, including "Your Conversation Starter Kit" published by the Institute for Healthcare Improvement and the Conversation Project, "PREPARE" created by the University of California, and "Five Wishes" published by Aging with Dignity.*