Respecting Choices[®] Instructions: Wakefulness versus comfort worksheet

These are your decisions on life sustaining treatments that you may want your patient advocate and health care team to know. Certain treatments often provide excellent results in healthy patients. However, in patients with certain chronic conditions or terminal illnesses these treatments may be unhelpful or even harmful. The purpose of this document is to help you decide, based on your condition and your values, how you feel about receiving this treatment.

People with serious illness sometimes have symptoms (pain, shortness of breath, or nausea) associated with their disease or its treatment. Whenever possible, your doctors and health care team will strive to manage your symptoms with as little impact on your wakefulness as possible. Sometimes, as an illness progresses and end of life nears, it becomes difficult to achieve good symptom control AND normal wakefulness. If this occurs, there is sometimes disagreement between the patient, family and the treatment team about which is most important. If this situation occurs in the future, please consider your values and specify which of the below options would be most consistent with your preferences.

If decisions need to be made regarding my wakefulness versus my comfort:

Select one:

	I highly	value	wakefu	lness.
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I am willing to tolerate physical discomfort to enable more wakefulness.

I highly value comfort.

I prefer to have my symptoms managed even if it means I may be sleepy and/or sedated.

My comments: _____

Patient name (please print):

Patient signature: _____

Date: ___

· As someone is declining, they will likely sleep more, either naturally or as a side effect of some of the medications provided.

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