

Discussing Advance Directives with Patients

This worksheet provides suggested language to help engage patients in discussions regarding advance directives. During discussions with patients, use the right column as a checklist to ensure you have covered all of the material.

Topic	Suggested Language	Checklist
Raising the issue of advance care planning with all patients (with decision-making capacity)	<p>[Not applicable for patients who have already requested assistance]</p> <p>I try to discuss advance care planning with all of my patients. In fact, I feel that this is such an important topic that I've talked with my own health care provider about my future care preferences. I've seen so many situations where people suddenly become so sick that they are unable to tell their loved ones or their health care providers what they want.</p> <p>Advance care planning is a step-by-step process to help you plan for health care decisions in your future. Advance care planning involves four main actions:</p> <ol style="list-style-type: none"> 1. Choosing a spokesperson. This is someone who can speak for you if you can't speak for yourself. Some people might call this person your surrogate. 2. Thinking about what you would want if you had to make difficult choices. 3. Talking about your views with your spokesperson, loved one, and health care providers. 4. Completing an advance directive to document your preferences. 	
Initiating conversations about advance care planning periodically (at intervals no longer than 3 years)	<p>[Not applicable for patients who have already requested assistance]</p> <p>It's been a while since we've talked about your health care preferences in the event you are unable to speak for yourself. Have you thought about what kind of treatments you would want or would not want? Do you know who you would want to make health care decisions for you if you can't speak for yourself?</p> <p>[In the event the patient's health status has changed since your last advance care planning discussion]</p> <p>Since the last time we spoke, your health has changed somewhat [explain]. Whenever your health status changes, it's a good idea to revisit the topic of advance care planning. Have you thought about what kind of treatments you would want or would not want? Do you know who you would want to make health care decisions for you if you can't speak for yourself?</p>	
Giving patients pertinent educational materials	<p>For general information about advance directives, here is a VA handout called <i>What You Should Know About Advance Directives</i>. It's an educational document that is written in a question and answer format. You might already have received this other document – <i>Your Rights Regarding Advance Directives</i> – it is helpful as well.</p>	
Encouraging discussion of preferences for future health care with loved ones	<p>I encourage you to talk with your loved ones, family members, and friends about how you'd want to be cared for in the future. This will help them understand your thinking and what you would want them to do if you could not speak for yourself. If you have an advance directive, I encourage you to go over it with these important people in your life so they know it exists and understand your wishes. It also gives</p>	

Topic	Suggested Language	Checklist
	them a chance to ask you questions and to talk with you about any concerns they might have.	
Highlighting the benefits of advance care planning and advance directives	Advance care planning will help both of us to understand your values and preferences for future health care if you become unable to make decisions for yourself. You can also choose to put your choices into a written document that I would make part of your health record. We call this document an advance directive. It would be used if you were to lose the ability to make decisions on your own, either temporarily or permanently.	
Appointing a health care agent	If you have someone you would like to act on your behalf in the event that you are unable to make your own health care decisions, you might want to consider completing an advance directive that appoints that person to be your health care agent. If you do not appoint a health care agent, VA will appoint a surrogate for you based on the following hierarchy: 1. health care agent, 2. Legal or special guardian (appointed by a court), 3. Next-of-kin: The next-of-kin is a relative, 18 years of age or older, in the following order of priority: spouse; child; parent; sibling; grandparent; grandchild, 4. Close friend. This may or may not be the person you <i>want</i> to make health care decisions for you. Who would you want to have as your surrogate?	
Describing the limitations of living wills	Some advance directive forms have a living will section that gives you a few specific examples of clinical situations where life-sustaining treatments might be needed. These examples are to help you imagine what kind of care you would want. While these scenarios can be helpful, no form can capture all of the possible clinical situations that you might experience. Living wills are limited to your preferences at a particular point in time, but your preferences may change over time. Your preferences will also need to be interpreted by your providers and your loved ones when decisions need to be made. Their interpretations may be quite different from what you intended. For these reasons, you may decide against attempting to specify treatment preferences in the living will portion of the advance directive and instead merely designate a health care agent.	
Reviewing the existing advance directive to ensure it is up to date and that it states the patient's intentions clearly	[if applicable] Let's take a look at your advance directive(s) and go over what you wrote down for your preferences. Is there anything here that you'd like to change or would you like to add anything? Let's take a look at who you listed for your health care agent. Is this the person you would want to make health care decisions for you if you cannot speak for yourself? Would you like to add or change anything else?	
Asking which advance directive remains active and which needs to be rescinded because of changes in the patient's preferences	[if applicable] It looks like you have more than one advance directive in your health record. Let's take a look at them and figure out if they are up to date. Once we figure that out, we can rescind the ones you no longer agree with and write up a new one for you, if needed.	