

My Quality-of-Life Statement

The goal of writing a quality-of-life statement is to have it express your personal preferences and to have it sound like you. The problem with most of the legal/medical forms is that they all sound alike and they don't allow your voice to be heard. I encourage you to use the questions I have listed below to express what you would want people to know about you if you were too sick to speak for yourself. You will know you have gotten it right when people read it and say, "Yes, this sounds like what he/she would say." By explaining what is important to you and making it very personal, you will help your doctors and family/friends feel more confident that they are truly honoring your wishes.

Remember, this document will go into effect when your brain no longer works well enough for you to speak for yourself. This document will be used when you are really sick or you are dying. If your brain is fine, you will be able to make your own decisions.

Use these sample questions to help you describe what is important for your doctors and family to understand about your life and healthcare preferences. Use a separate sheet of paper if you need more room to write down your answers. Feel free to add anything else that you think people should know. This is your life and your wishes. (When you are done, attach your Quality-of-Life Statement to your Advance Directive/Living Will.)

1. Types of illnesses where this advance directive would apply. Do you want this statement to apply only when you are dying or should it also apply when you will continue living with limited mental capacity from diseases like dementia, stroke, or other brain injuries? (If you are uncertain how to answer this question, you can skip this question.)

2. What is important to me? What makes my life worth living?

**3. What conditions would I find horrible to live with long term?
What would be a fate worse than death?**

4. What would be an acceptable level of better? I wouldn't like it but I would be willing to live with _____.

5. What would be important to me as I die? What is a good death in my opinion?

6. What are my preferences regarding cardiopulmonary resuscitation (CPR), being on a ventilator (breathing machine), and/or feeding tubes. (*You should ask more questions about these medical treatments and talk to your doctor about your specific health situation before making these medical decisions.*) Would I be willing to be on a ventilator and/or have a feeding tube for a *short period* of time so I can recover from my illness/injury? Would I be willing to be on a ventilator and/or have a feeding tube for the *rest of my life*?

7. Reassurances for my decision maker(s). Imagine the person who will be making the decisions for you is sitting beside your hospital bed. What would you want to say to help him/her feel more comfortable and confident that he/she is making the right medical decisions for you?

8. What do I want the doctors to know about honoring my religious/cultural beliefs both while I am sick and/or while I am dying?

9. Additional guidance for the doctor. Is there anything else that you would want your doctor to know about you that would help him/her do right by you?

Print and Sign: _____

(Notarize if required by your state.)

Date: _____