

# The Conversation



*My girlfriend asked me, "If you could know how and when you were going to die, would you want to know?" I told her no. And so she said, "Forget it then."*

~Steven Wright

We can't control everything about our death. But if we communicate effectively, we make it more likely that our wishes for the end of life will be known and respected. Simply completing an advance directive does not ensure it will be respected. Recent studies indicate the single most powerful thing a person can do to improve the chance for gentle dying is --- simply and courageously --- to talk about it.

Effective communication with those who will be called upon to make decisions on our behalf is key to the likelihood that our wishes are carried out. Compassion & Choices offers a *Good to Go Toolkit* and other resources that can help you define priorities, understand who you need to talk with and come up with ideas on how to get the conversation rolling. It is never too early to get started.

## What to talk about

Your discussions should include feelings about how you would want to be treated in a variety of situations. Identify your main concerns, worries and fears. Those close to you need to know what you would prioritize if you were living with physical pain, disability, terminal illness, dementia and debilitating chronic illness. Consider who you want to make choices if you can no longer make your own decisions and let people know who that person will be. Talk to your doctor about specific treatments that

could come up, particularly given your current medical condition.

The *Good to Go Toolkit* includes a Values and Priorities Worksheet to help you define your priorities.

Clarifying what you do and do not want and where you are unsure is an important step in the ongoing process of determining wishes for your end-of-life care.

Before talking with your physician, you will want to prepare questions about what they can and will do based on your advance directive. For example, if you specify that you do not want a specific treatment, would this doctor ensure that you were kept comfortable? Will the doctor do his/her best to fully explain all procedures/treatments, alternatives and risks to you and/or your family/representative(s)? Are there religious affiliations and/or policies at the local hospitals that would limit your provider or the facility from complying with specific parts of your directive?

## Whom to talk to

First and foremost, talk to your personal physician and family, who have the greatest impact on your care choices. The other people who need to know about your end-of-life concerns and wishes could include your health care representative, estate attorney, caregivers and friends.

It is possible in conversation with your physician or others you may realize they do not support your wishes. You have the right to change physicians and to name a health care representative who supports your desires. If you anticipate other family members may strongly disagree, communicate directly (verbally and in writing) with those you anticipate will not support your wishes and be clear that you do not want them involved in decision making and why.

## When to have the conversation

Death is like having an elephant in the room: even if no one mentions it, everyone knows it's there. *How do you begin?*

One approach is to consciously create time to initiate the conversation. You might choose a family gathering for holidays or special events or when illness and doctor's visits provides an opening.

Another approach is to stay alert to spontaneous opportunities. You might prepare to introduce the topic of end-of-life wishes when a particular subject arises, such as concerns about losing various aspects of your independence.

Decide if it would work better to have individual conversations with specific family members first or a group discussion. You might begin by giving family members a copy of your advance directive.

## Conclusion

It is important to think through your concerns and how they affect your wishes for end-of-life care, and to communicate those wishes to your physician and your loved ones. If ever they have to make decisions on your behalf, that difficult task is made easier by being confident that they know your wishes. You relieve them of the burden of guessing what you would choose when you make your preferences clear to everyone well ahead of a medical crisis.



## Did You Know?

Your membership card from Compassion & Choices has space on the back for the name and phone number of your agent(s) for health care.

As a benefit of membership at the Benefactor level and above, Compassion & Choices can put your advance directive on a wallet size CD rom or a keychain flash drive that you can carry with you. To learn more about this level of membership, call us 800.247.7421.

## For starters . . .

Conversations about your wishes for end-of-life care can be difficult, but there are sensitive ways to broach the conversation.



### With loved ones:

"It's important to me to be able to talk honestly with you about my concerns and wishes if I ever become seriously ill or unable to speak for myself..."

"My doctor/ attorney/ \_\_\_\_\_, says I need to go over my advance directive..."

"I want to make sure that I get the best care possible and the type of care that I want, so there are things we should talk about..."

"I want to make it as easy as possible for my family to make medical decisions on my behalf if I ever become incapable of communicating my wishes..."

"If you are ever in a position where you need to make health care decisions for me, it will be most helpful to you if you know what I really want..."

### With your physician:

"If my medical condition becomes incurable and death is the only predictable outcome, I'd like to be at home with my loved ones. Will you support that?"

"If I ask for it at the end of my life, will you make a referral to hospice for me?"



You can also download a sample "Letter to My Doctor" at [www.compassionandchoices.org/LetterToMyDoctor.pdf](http://www.compassionandchoices.org/LetterToMyDoctor.pdf)