



## Are Some Conditions Worse Than Death?

Name & Date \_\_\_\_\_

This worksheet helps you to think about situations in which you would **not** want medical treatments intended to keep you alive. These days, many treatments can keep people alive even if there is *no* chance that the treatment will reverse or improve their condition. Ask yourself what you would want in the situations described below if the treatment would not reverse or improve your condition.

**Directions:** Circle the number from 1 to 5 that best indicates the strength and direction of your desire. If you wish, you can add additional thoughts on the *Comment* lines.

- 1 -- **Definitely want** treatments that might keep you alive.
- 2 -- **Probably would want** treatments that might keep you alive.
- 3 -- **Unsure of what you want.**
- 4 -- **Probably would NOT want** treatments that might keep you alive.
- 5 -- **Definitely do NOT want** treatments that might keep you alive.

<b>What If You . . .</b>	<b>Definitely Want Treatment</b>	←————→	<b>Definitely Do Not Want Treatment</b>		
a. No longer can recognize or interact with family or friends.	1	2	3	4	5
<i>Comment</i> _____					
b. No longer can think or talk clearly.	1	2	3	4	5
<i>Comment</i> _____					
c. No longer can respond to commands or requests.	1	2	3	4	5
<i>Comment</i> _____					
d. No longer can walk but get around in a wheel chair.	1	2	3	4	5
<i>Comment</i> _____					
e. No longer can get outside and must spend all day at home.	1	2	3	4	5
<i>Comment</i> _____					
f. Are in severe untreatable pain most of the time.	1	2	3	4	5
<i>Comment</i> _____					

## What If You . . .

Definitely  
Want  
Treatment



Definitely  
Do Not Want  
Treatment

- |    |   |   |   |   |   |   |
|----|---|---|---|---|---|---|
| g. | Are in severe discomfort most of the time (such as nausea, diarrhea). | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| h. | Are on a feeding tube to keep you alive.                              | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| i. | Are on a kidney dialysis machine to keep you alive.                   | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| j. | Are on a breathing machine to keep you alive.                         | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| k. | Need someone to take care of you 24 hours a day.                      | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| l. | No longer can control your bladder.                                   | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| m. | No longer can control your bowels.                                    | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| n. | Live in a nursing home permanently.                                   | 1 | 2 | 3 | 4 | 5 |
|    | <i>Comment</i> _____  |   |   |   |   |   |
| o. | Other:  | 1 | 2 | 3 | 4 | 5 |
|    | <i>Explain</i> _____  |   |   |   |   |   |