NORTH SIMCOE MUSKOKA HOSPICE PALLIATIVE CARE NETWORK
Guide for Serious Illness Conversations

Use this guide to find how much they know, how much they want to know, share information, respond to their feelings, plan and follow through.

1 I would like to talk with you about what is ahead with your illness, and do some thinking in advance about what is important to you. This will help us provide you with the care you want. Is that ok?

2 What is your understanding of where you are with your illness?

3 Can I share with you my understanding of where things are, would that be helpful?

4 I am worried that you could get sick quickly, and I think it is important to be prepared for that.

5 I wish we were not in this situation, but I am worried that time may be as short as ____(days to weeks, weeks to months, months to a year).

6 I hope that this is not the case, but I am worried that this may be as strong as you will feel, and things are likely to get more difficult.

7 I am going to help you. We can figure this out together. Let's talk about what brings meaning to your life, what brings you joy.

8 I hope we can set short term and long term goals. Let's talk about values and preferences. It helps define who we are and figure out what brings us joy. If the nurses and doctors understand how you want to live your life, they can work with you to match your treatment options. For example recommend the dosage of pain medication or how to plan for a big event, like a birthday or an anniversary.

9 Many people with your kind of ___________ often think about how they want the end of their life to be, they also think about dying. Have you ever though about how you want that to be?

10 What I have heard you say, is that you know the disease is getting worse, despite the best efforts of your doctors, it is going to keep getting worse and you want to be comfortable. Both when the time comes to die, you want that to be as painless and comfortable as possible. And, you really want a natural death. With that in mind, what I think we should do today in the medical record is write what we call a DNR. What that means is if you should die here in the hospital that we would allow natural death to happen. That we would not use heroic measures to try to reverse death. Is that what you want.

11 For me to be clear, we are going to keep doing every thing we can to keep you as comfortable and as well as possible. We are only talking about what we would do when you do die. Before you die, we are going to keep you well but once death happens, we are not going to try to reverse it.

12 Have you heard the word Hospice. I think many people are frightened by that word because they only hear it in the context often after someone you have known has died and someone says “Oh yes, they were at Hospice." But it really means something quite different. It is a team of people to help at this time of your life to achieve the things that you just said you wanted – to be comfortable, not to be a burden, to help take care of you for as long as you have left.

13 My goal today was to introduce this concept and to tell you that I and the rest of your doctors think that this is the best way to take care of you for the rest of your life. How do you feel about this.

Follow the patients lead and
continue the conversation.

Palliative Nursing Support Line
(705) 329-0340 | (844) 429-0340

At North Simcoe Muskoka Hospice Palliative Care Network we strive to ensure that healthcare providers and family members have access to resources needed to assist them with palliative care. In response, we have launched the Palliative Nursing Support Line. This on-call service is designed to assist healthcare providers and family members with questions related to pain and symptom management of patients in all sectors, as well as Medical Assistance in Dying (MAID) queries.