**Different Philosophies of Care for Advance Care Planning**

**What kind of medical care do you want?**

Advance care planning includes conversations to help you think about, talk about, and document your wishes for health care in the event that you become unable to speak for yourself. These conversations are about specific health conditions that you are likely to experience.

When having these conversations, it is important to reflect on your own personal values and wishes for medical care. Questions to consider might include:

- What brings quality to your life?
- What is important to you?
- What treatments do you want? What treatments don’t you want?
- Realistically, how will the different treatment options affect my quality of life?

**Philosophies of Care**

There are three main Philosophies of Care to choose between when thinking about the types of medical treatments you may want or not want to receive. It may be helpful to think about how your wishes align with these philosophies, and to share these thoughts with your healthcare team, substitute decision maker(s), and family and friends.

**PHILOSOPHY #1: Comfort care**

- You understand and accept that there is probably not much time left to live.
- You do not rush or delay the process of dying, but accept it, whatever happens.
- Comfort care IS CARE— it includes all possible medical, physical, emotional, social and spiritual supports needed to ensure you are comfortable.
- Note: Comfort care can usually be done in your long-term care home.

**PHILOSOPHY #2: Try everything to help me live longer**

- You want to use all available treatments to try to keep you alive. This could include simple things like antibiotics, all the way up to invasive things like artificial life support machines.
- Note: Some types of medical care may be provided within your long-term care home, while other types of care can only be done in an emergency room or hospital.
PHILOSOPHY #3: The menu of possible treatments

- This philosophy is a mix of #1 and #2. Some treatments you will accept, and others you will not accept.

- Your preferences may depend on the situation you are dealing with at the time. For example, some people may choose to accept treatments that are relatively simple (e.g., antibiotics to treat pneumonia). However, they may choose not to accept more complicated treatments with unclear outcomes, where they may not recover as well as they would like (e.g., surgery or artificial life support).

Please remember that no matter how you are feeling now, if a medical emergency happens, your healthcare team will discuss specific treatment options again at that time. Starting the conversation now allows your healthcare team and your substitute decision maker(s) to better understand your views, wishes and preferences, so it will be easier when an emergency happens and a decision is needed.

Notes and Reflections

You can use this space to jot down notes and reflections about the information presented on this handout. A few questions to consider include:

1. What brings quality to your life?

2. What is important to you?

3. Which of the three philosophies listed on this resource most closely aligns with your values and wishes?