

Tools for Creating Your ESKD Life Plan



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Welcome

Tools for Creating your ESKD Life Plan

The End Stage Kidney Disease (ESKD) Life Plan is about making your healthcare goals, values and preferences known. It is important to plan ahead, and the best time to express yourself is now.

Let's get started!

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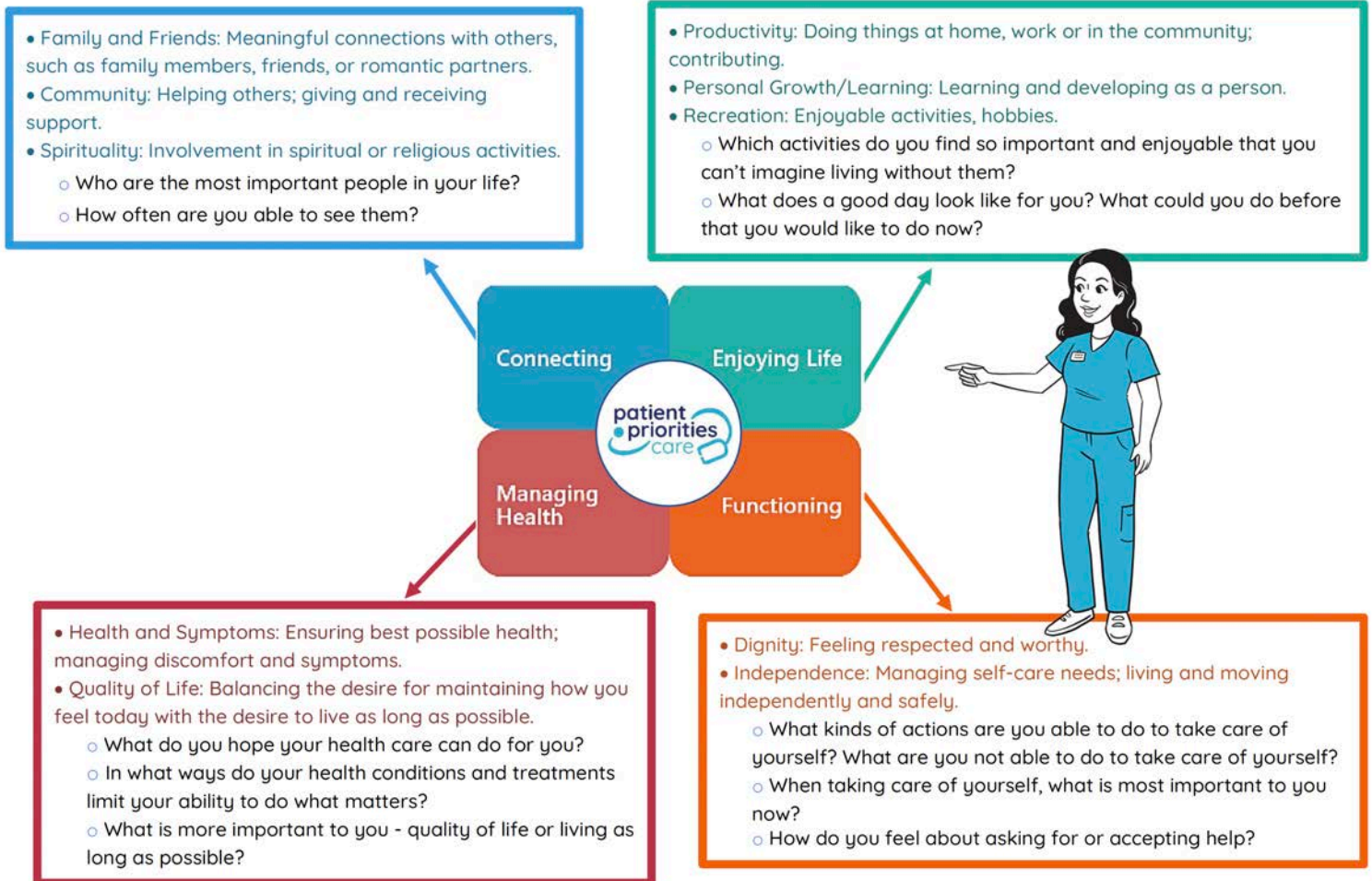
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Part 1: My healthcare goals, values, and preferences

This section allows you to share what matters to you. This information will help your medical team better understand who you are and what is most important to you.

You can use these topics to help you fill out what is most important to you on the next page:

Values Conversation Starters



You can visit MyHealthPriorities.org, where an interactive online experience will walk you through the thought process.

When you have your priorities, print them out or take a picture. You can show them to your doctor on your next visit.

Most Important Health Goals

Health goals are specific and realistic activities or outcomes that show you are doing what matters most in your life. These health goals are what you want to achieve with your healthcare.

1. _____
2. _____

Care Preferences

Helpful care: Self-management tasks, clinical visits, tests, or procedures that you think are helping most with your health goals and you can do them without too much difficulty.

1. _____
2. _____

Burdensome care: Self-management tasks, clinical visits, tests, or procedures that you don't think are helping your goals and are burdensome or too difficult. You should talk with your doctor about whether these are helping your goals. If not, can you stop them or cut back? If they are helping, is there a way to make them less burdensome or less difficult?

1. _____
2. _____

Current Medications

Helpful: Medications you think are helping most with your health goals and you can take without too much difficulty.

1. _____
2. _____

Burdensome: Medications you don't think are helping your goals and are too burdensome. You should talk with your doctor about whether these are helping your goals. If not, can you stop or decrease them? If they are helping, is there a way to make them less burdensome?

1. _____
2. _____

What is the symptom that bothers you the MOST?

What is your MOST important health goal?

What ONE THING do you most want to focus on so that you can achieve your most important health goal more easily?

Part 2: Discussing choices for managing my kidney disease

Best Case Worst Case tool

1. Your trusted healthcare profession will discuss the options available to you for managing your kidney disease.
2. Use the tool below to discuss the best case, worst case and most likely stories for each of the options that you discuss.
3. The most likely outcome for each option should be marked along the spectrum between best case and worst case scenarios.

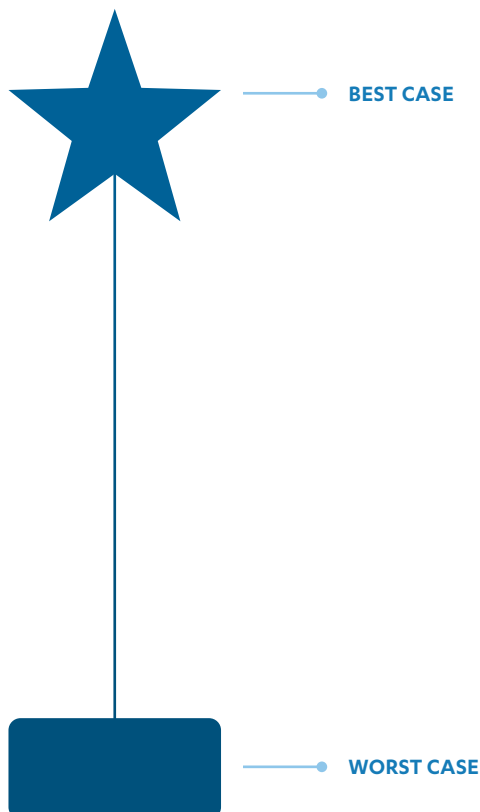
To learn more about how the Best Case Worst Case tool works, visit patientpreferences.org/best-case-worst-case/

To hear about how the Best Case Worst Case tool works, visit:

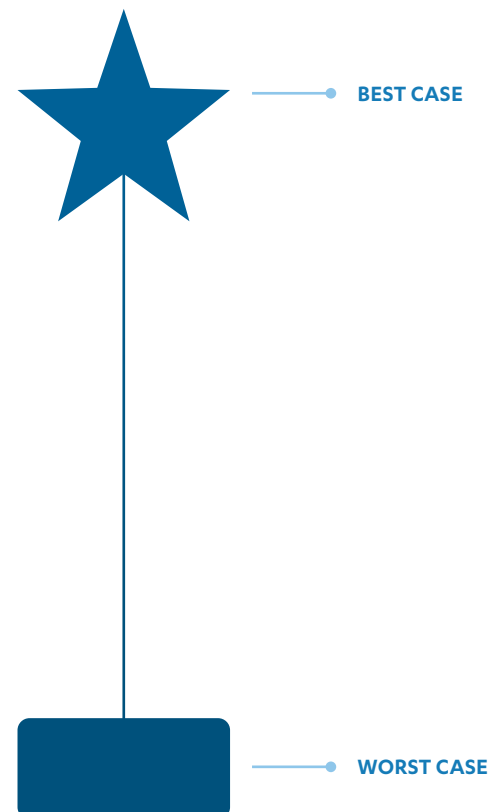


Dr. Schwarze, Scenario Planning: youtu.be/eBgPRuRaiPw

ESKD Management Strategy or Access Type Discussed



ESKD Management Strategy or Access Type Discussed



Part 3: Identifying my care team

You may have doctors or other healthcare professionals who understand your goals, values and preferences very well. If so, and if you would like them involved in conversations about managing your kidney disease, please list them in this section.

Filling out this section can also help healthcare professionals identify who needs to be notified if there are any changes in your health.

Remember also to discuss your goals, values and preferences with your doctor(s) and provide them with a copy of your ESKD Life Plan.

Facility information

Dialysis Facility:	Phone #:
Facility Nephrologist:	Facility Charge Nurse:
Facility Social Worker:	Facility Dietician:

Non-Facility information

Non-facility Nephrologist:	Phone #:	Transplant Nephrologist:	Phone #:
Other Nephrologist:	Phone #:	Vascular Access Coordinator:	Phone #:
Interventionalist:	Phone #:	Vascular Access Surgeon	Phone #:
Transplant Surgeon:	Phone #:	Cardiologist:	Phone #:
Primary Care Doctor:	Phone #:		

Part 3: Identifying my care team (continued)

Are there family members, friends, or other people that you want to be involved in helping you make decisions?

Name:	Role:	Phone #:
Name:	Role:	Phone #:
Name:	Role:	Phone #:

In the event of an emergency, who would you like to be called?

Name:	Role:	Phone #:	Alternate Phone #:
Name:	Role:	Phone #:	Alternate Phone #:

Part 4: Making my ESKD Life Plan

What is the Life Plan?

- The Life Plan is your individualized treatment strategy for living with kidney failure
- The Life Plan details multiple treatments for kidney failure for you
- The Life Plan includes your preferred treatment for your kidney failure- HD, PD or transplant (see section 2: Learning about choices for managing my kidney disease)
- The Life Plan also includes what you would like to do next if your preferred treatment method does not work out
- The Life Plan describes how you will protect your blood vessels for future vascular access
- Your Life Plan will also include your preferred vascular access
- The Life Plan will include what you would like to do next if your preferred vascular access does not work out

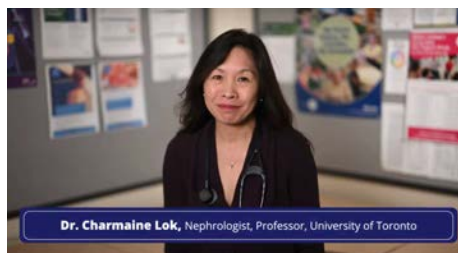
Who makes my Life Plan?

- You make your Life Plan with your care team

What if I want to change my Life Plan?

- You can change your Life Plan any time you want
- You and your care team will review your Life Plan at least once a year to make sure it still fits with your preferences

To hear about the ESKD Life Plan, visit:



Dr. Lok, ESKD Life Plan: youtu.be/SGqsTbx71WI

My ESKD Life Plan

Today's date:

About Myself

Full name:	What I prefer to be called:
How old I am today:	My pronouns:
Languages I speak:	My preferred language:
The arm I use most: right/left	What I want my ESKD Care Team to know about me:

Your ESKD Life Plan Coordinator

Which health care professional from Part 4 would you like to be in charge of coordinating your ESKD care? They will keep a record of your ESKD Life Plan and make sure it gets updated regularly.

Name:	Role:	Phone #:
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My ESKD Life Plan

Treatment type 1	Treatment type 2	Treatment type 3
Access strategy	Access strategy	Access strategy

Questions I want to ask my doctor