

Patient ID: _____

Date: ___/___/___

Patient Survey

Verbally Administered by Research Assistant

1. How confident are you that you will get the type of medical care you want if you become seriously ill and could no longer communicate your preferences?

- Not at all confident
- Slightly confident
- Somewhat confident
- Fairly confident
- Very confident

When answering the following questions, please think about the primary provider who has been treating your cancer.

2. Who do you consider to be your primary cancer provider?

- Oncologist
- Oncology Nurse Practitioner
- Oncology Physician Assistant
- Other (What is the role of that provider: _____)

3. In general, how often does this provider explain things in a way that is easy to understand?

- Never
- Sometimes
- Usually
- Always

4. In general, how often does this provider listen carefully to you?

- Never
- Sometimes
- Usually
- Always

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5. In general, how often does this provider seem to know the important information about your medical history?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

6. In general, how often does this provider show respect for what you have to say?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

7. In general, how often does this provider spend enough time with you?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

8. Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?

- 0 Worst provider possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best provider possible

9. Has your oncology team discussed with you what to expect with your illness in the future?

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- ¹ Yes, definitely
- ² Yes, somewhat
- ³ No

10. Has your oncology team ever asked what's most important to you?

- ¹ Yes, definitely
- ² Yes, somewhat
- ³ No

11. Has your oncology team talked about how the treatment plan should match what is most important to you?

- ¹ Yes, definitely
- ² Yes, somewhat
- ³ No

When answering the following questions, please think about the last decision about your cancer treatment you made together with a health care provider.

12. I am satisfied that I was adequately informed about the issues important to my decision.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

13. The decision I made was the best decision possible for me personally.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

14. I am satisfied that my decision was consistent with my personal values.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

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15. I expect to successfully carry out (or continue to carry out) the decision I made.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

16. I am satisfied that this was my decision to make.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

17. I am satisfied with my decision.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

When answering the following questions, please think about the last decision about your cancer treatment you made together with a health care provider.

18. It was the right decision.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

19. I regret the choice that was made.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

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20. I would go for the same choice if I had to do it over again.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

21. The choice did me a lot of harm.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

22. The decision was a wise one.

- ¹ Strongly disagree
- ² Disagree
- ³ Neither agree nor disagree
- ⁴ Agree
- ⁵ Strongly agree

23. Have you talked with a family member or close friend about the types of medical care you want or don't want if you become seriously ill in the future and could no longer communicate your preferences?

- ¹ No
- ² Yes

23a. Of those listed below, who was that person/those people? (Select all that apply)

- 1 Spouse/partner
- 2 Daughter
- 3 Son
- 4 Daughter-in-law
- 5 Son-in-law
- 6 Stepdaughter
- 7 Stepson
- 8 Sister
- 9 Brother
- 10 Sister-in-law
- 11 Brother-in-law
- 12 Mother
- 13 Stepmother
- 14 Mother-in-law
- 15 Father
- 16 Father-in-law
- 17 Granddaughter
- 18 Grandson
- 19 Niece
- 20 Nephew
- 21 Aunt
- 22 Cousin
- 23 Stepdaughter's son/daughter
- 24 Stepson's son/daughter
- 25 Daughter-in-law's son/daughter
- 26 Son-in-law's son/daughter
- 27 Boarder/renter
- 28 Paid aide/Housekeeper/Employee
- 29 Roommate
- 30 Ex-wife/Ex-husband
- 31 Boyfriend/girlfriend
- 32 Neighbor
- 33 Friend
- 34 Service/Someone from the place you live
- 35 Co-worker
- 36 Minister, Priest, or other Clergy
- 37 Psychiatrist, Psychologist, Counselor, or Therapist
- 38 Other Relative
- 39 Other Non-Relative