

**Audit of Communication, CarE Planning, and
DocumenTation:
A multicenter, prospective study**

The ACCEPT Study

**PATIENT AND FAMILY
INTERVIEW REFERENCE CARDS**

Card 1: Health Literacy

(To be used for Section 1, demographics.)

Allergic

Jaundice

Anemia

Directed

Colitis









Constipation

Fatigue

Osteoporosis

Card 2: Frailty Index

(To be used for Section 1.)

	<p style="text-align: center;">Very Fit (category 1)</p> <p>People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.</p>
	<p style="text-align: center;">Well (category 2)</p> <p>No active disease symptoms but less fit than people in category 1. Often, they exercise or are very active occasionally, e.g. seasonally.</p> <p><i>Well</i> older adults share most attributes of the very fit, except for regular, vigorous exercise. Like them, some may complain of memory symptoms, but without objective deficits.</p>
	<p style="text-align: center;">Managing Well (category 3)</p> <p>Medical problems are well controlled, but people in this category are not regularly active beyond routine walking.</p> <p>Those with treated medical problems who exercise are classed in categories 1 or 2.</p>
	<p style="text-align: center;">Vulnerable (category 4)</p> <p>Not dependent on others for daily help, but often symptoms limit activities. A common complaint is being “slowed up” and/ or being tired during the day. Many people in this category rate their health as no better than “fair”.</p> <p>Memory problems, if present, can begin to affect function (e.g. having to look up familiar recipes, misplacing documents) but usually do not meet dementia criteria. Families often note some withdrawal – e.g. needing encouragement to go to social activities.</p>
	<p style="text-align: center;">Mildly Frail (category 5)</p> <p>More evident slowing and individuals help needed in “high” activities of daily living (finances, transportation, heavy housework, medications). Mildly frail people might have difficulty with shopping or walking outside alone, meal preparation, and housework. Often, they will have several illnesses and take multiple medications.</p> <p>This category includes people with mild dementia. Their common symptoms include forgetting the details of a recent event, even though they remember the event itself, asking the same question, or telling the same story several times a day and social withdrawal.</p>
	<p style="text-align: center;">Moderately Frail (category 6)</p> <p>Individuals need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.</p> <p>If a memory problem causes the dependency, often recent memory will be very impaired, even though they seemingly can remember their past life events well.</p>
	<p style="text-align: center;">Severely Frail (category 7)</p> <p>Completely dependent on others for all or most personal activities of daily living, such as dressing and feeding.</p>
	<p style="text-align: center;">Very Severely Frail (category 8)</p> <p>Completely dependent, approaching the end of life. Typically, people in this category could not recover from even a minor illness.</p>

Card 3: Treatment Options (Patient)

(To be used for Section 3, question 3.)

- Use machines and all possible measures including resuscitation (CPR) with a focus on keeping me alive at all costs.
- Use machines and all possible measures with a focus on keeping me alive but if my heart stops, no resuscitation.
- Use machines only in the short term to see if I will get better but if my illness is prolonged, change focus to comfort measures only. If my heart stops, no resuscitation (CPR).
- Use full medical care to prolong my life but if my heart or my breathing stops, no resuscitation (CPR) or breathing machines.
- Use comfort measures only with a focus on improving my quality of life and comfort. Allow natural death and no artificial prolongation of life and no resuscitation.
- Unsure

Card 3: Treatment Options (Family Member)

(To be used for Section 3, question 3.)

- Use machines and all possible measures including resuscitation (CPR) with a focus on keeping them alive at all costs.
- Use machines and all possible measures with a focus on keeping them alive but if their heart stops, no resuscitation.
- Use machines only in the short term to see if they will get better but if their illness is prolonged, change focus to comfort measures only. If their heart stops, no resuscitation (CPR).
- Use full medical care to prolong their life but if their heart or their breathing stops, no resuscitation (CPR) or breathing machines.
- Use comfort measures only with a focus on improving their quality of life and comfort. Allow natural death and no artificial prolongation of life and no resuscitation.
- Unsure

Card 4: Importance & Satisfaction

(To be used for Section 4.)

For each question asked, use the following options to indicate how you rate the importance of and your satisfaction with the treatment options.

Importance

- 1 - Not at all important
- 2 – Not very important
- 3 – Somewhat important
- 4 – Very important
- 5 – Extremely important

Satisfaction

- 1 – Not at all satisfied
- 2 – Not very satisfied
- 3 – Somewhat satisfied
- 4 – Very satisfied
- 5 – Completely satisfied

Card 5: CANHELP Lite

(To be used for Section 5.)

For each question asked, please indicate how satisfied you are by selecting one of the following:

- 1 – Not at all satisfied
- 2 – Not very satisfied
- 3 – Somewhat satisfied
- 4 – Very satisfied
- 5 – Completely satisfied