Decision Counseling Guide:

_____

Decision to be Made

Patient: _____ MRN: _____

Counselor: _____ ID: _____

Date: _____

Patients have values that may favor **Option A:** _____ or **Option B:** _____
Use this guide to identify those values (reasons/goals), weigh their effects and importance, and clarify preference.

STEP ONE: Help the patient identify reasons/goals that make them favor one option (A/B) over the other (A/B), select the most important reasons/goals (up to the top 3), and rank those in order of importance (1= most important, 2 = 2nd most important, 3 = 3rd most important). Enter the top reason(s)/goal(s) in **STEP TWO**.

Reason(s)/Goal(s) Favoring Option A over B	**Reason(s)/Goal(s) Favoring Option B over A**
_____	_____
_____	_____
_____	_____

STEP TWO: Review the top reason(s)/goal(s) with the patient. Then, ask how much more each one makes the patient favor the related Option (A/B) over the other Option (A/B). Example: "*It seems that 1. Getting peace of mind makes you favor Option A more than Option B. How much more?*" If there is only one reason/goal, complete this step for that reason/goal and go to **STEP FOUR**. If there are two or three reasons/goals, complete this step for those reasons/goals and proceed to **STEP THREE** and **STEP FOUR.**

	Level of Effect					
Top Reason(s)/Goal(s)	About the Same	A Little More	Some-what More	Much More	Very Much More	Overwhelmingly More
1. _____	☐	☐	☐	☐	☐	☐
2. _____	☐	☐	☐	☐	☐	☐
3. _____	☐	☐	☐	☐	☐	☐

STEP THREE: Ask the patient how much more important one reason/goal is than the other reason/goal. Example: "*How much more important is 1. Getting peace of mind than 2. Avoiding bad news?*" If there are two reasons/goals, enter how much more important 1 is compared to 2. If there are three reasons/goals, enter the importance of 1 compared to 2, 2 compared to 3, and 1 compared to 3.

	Level of Importance					
Top Reason(s)/Goal(s)	About the Same	A Little More	Some-what More	Much More	Very Much More	Overwhelmingly More
1. compared to **2**.	☐	☐	☐	☐	☐	☐
2. compared to **3**.	☐	☐	☐	☐	☐	☐
1. compared to **3**.	☐	☐	☐	☐	☐	☐

STEP FOUR: Ask the patient to indicate what they want to do about _____ on a scale of 0 to 10 (0 = I really don't want to, 5 = I'm unsure, 10 = I really want to). Enter the result and develop an action plan based on this result.

I don't want to				I'm unsure				I want to		
0	1	2	3	4	5	6	7	8	9	10
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐