Informed Decision Making: Get help from your









How might this pose a risk to my caregiver?

(if applicable)



| What is the decision I need to make? | ? |
|---|---|
| How much time do I have to make th | nis decision? |
| Who is involved in making this decis | sion? |
| What are my values that affect this o | decision? |
| Be | nefits |
| How might this benefit me? (possible/probable outcomes) | How might this benefit my caregiver? (if applicable) |
| | |
| | |

Risks

How might this pose a risk to me?

(possible/probable risks)



| Alternat | ilves |
|---|---|
| What are my options for the sh (alternative treatments, no tre | _ |
| | |
| | |
| Intuiti | |
| What do I feel and think al | oout these options? |
| | |
| | |
| | |
| | |
| Next st | eps |
| Examples: I need to talk to my family. I need time to think my decision through. I want more information. | eps I would like to wait on treatment. I want a second opinion. I would like to??? |
| Examples: I need to talk to my family. I need time to think my decision through. | I would like to wait on treatment. I want a second opinion. |



Remember, to make an informed decision about your health, it helps to use your... B R A I N.

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