



How to Write a Death Plan: Worksheet

A Sacred Passing: Death Midwifery & Community Education

The Plan: A Death Plan fills in the information gaps not covered by a living will, last will and testament, Advanced Care Directive, or funeral plan. It is designed to tie those plans together cohesively for families and loved ones to follow.

PLAN A: Ideal **PLAN B:** Limiting circumstances **PLAN C:** accident/traumatic/unexpected **Plan D:** Violence **Plan E:** Choice

Include a dated, signed or notarized copy 1) in your Advanced Directives, 2) In Medical charts, 3) with your support team, 4) a copy with You.

Death Care Forms Checklist ☐ POLST ☐ Durable Power of Attorney for Health Care and/or Finances ☐ Advanced Directive (Living Will) ☐ Dementia & Alzheimers Advanced Directive ☐ Last Will and Testament ☐ Funeral & burial arrangements ☐ Disposition Authorization	Guiding questions/prompts • When you are ill, what do you find you want/need? • What do you NOT want? • When you are very stressed, what relaxes you and brings you comfort? • Where do you hold or feel tension in your body when you are stressed? • How do you approach any situation less than optimal from a harm reduction standpoint?
Pre Death	Pre Death
Place Home, hospice, hospital, skilled nursing facility: rest home, assisted living, care center, rehabilitation center, community care home • Have you thought about whether you wanted to die indoors or outdoors?	Interventions • Medical, comfort measures, • Spiritual • CPR? Oxygen? Feeding Tube? IV fluids? Respirator? • Bolstering? Turning? Mouth Care? •
Method Natural course, terminal illness, VSED: voluntary stopping eating & drinking, MAID: medical aid in dying, other • If you had a terminal diagnosis, would you consider taking control of the timing of your death? • How will you communicate what you do/n't want?	• Medication • Comfort care, a regular regime, alternative meds, or alternative medical practitioners
Care Team Members and Roles Family, friends, clergy, Deathcare provider, medical caregivers, pets Is there anyone that you do not want in attendance?	Pain control • Do you want to have any sort of medical / prescription pain reduction? What kind? When? • Do you want to have any sort of nonmedical/other pain reduction? What kind? When? • What level (1-10) is acceptable? • Have a conversation about the small line between pain control and lucidity.
Environment • In what room or space, temperature, lighting, scents, music, noise levels, furnishings, bedding, focal points: personal items, pictures, flowers, secular objects • There is research that indicates for many hearing people, auditory senses are the last sense to go; if you can hear, what do you want to hear? • What senses are essential to you? How do you want to experience these senses?	Pre Death Vigil

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<i>Post Death</i>	<i>Post Death</i>
Preparing the body Cleaning, dressing, laying in honor, esthetics (makeup, hair), embalming, organ or body donation • If your people want to wash your body, would you allow that? If so, whom would you feel comfortable with doing that? • Have you thought about your disposition options?	Ceremony/Ritual Spiritual, ethnic, customary; when, where, facilitated by who, for who
Transportation • By who, to where, when, and in what. • In some states, individuals can transport the body with a permit. What are the state laws?	Send Off/Homegoing/Funeral/Memorial/Celebration • When, where, how many attendees (who) • Facilitated by who? • Music • Photos
Vigil Where, how long, what do/n't you want the space to feel like, sound like, smell like,	Disposition of the body • buried, cremated; acquainted, natural organic reduction, green burial, burial at sea • Do you want to be embalmed? • In what, where, and by whom, attendees • WA State requires Disposition Authorization Form
Ceremony/Ritual Spiritual, ethnic, customary; when, where, facilitated by who, for who	Obituary • What are some moments that only you know about to add to your obit? • Would you like to write your obituary?
	Extra Personal Notes: 

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<i>Pre Death</i>	<i>Pre Death</i>
Place	Interventions
Method	Medication
Care Team Members	Pain control
Environment	Pre Death Vigil
<i>Post Death</i>	<i>Post Death</i>

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Transportation	Send Off/Homegoing/Funeral/Memorial/Celebration
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