# Letter Project: What-Matters-Most Letter and planning for your future

**What is the Letter Project?**

The Letter Project is a national effort to help all Americans discuss their values and preferences with their family. Using a form and answering some simple questions, any adult can write about what matters most to them when it comes to their healthcare and about some choices they want to make for their future.

**What is the need for the Letter Project?**

Most doctors do not talk to their patients about what type of care they want at the end of their life. Thus, patients do not have any say in what happens to them. The letter helps you write a simple letter and tell your doctor and your family about what type of care you want at the end of life.

**I am not at the end of my life. Why do I have to write the letter now?**

It is best to write the letter when you are still healthy and able to speak for yourself. Stanford undergraduate students have written the what-matters-most letter, as have some high-school students. The point is, it is always too early until it is too late. So best write your letter now.

**Who should write the what-matters-most letter?**

All adults should write the letter. Numerous people in the country have written their letter and given it to their doctor and their family. Please write your letter now.

**What happens if I don’t write the what-matters-most letter?**

When your doctor does not know what matters most to you at the end of life, they will likely give your treatments what you do not want or treatments that are too burdensome. If your family does not know what you want and what matters to you, they will have to bear the big burden of making decisions on your behalf.

**What do you want me to do?**

Answer the questions in the what-matters-most letter. Discuss it with your family and sign the letter it and give it to your doctor.

**What language is the letter available?**

The what-matters-most letter is available in English and many languages like Spanish, Chinese, Tagalog, Vietnamese, Hindi, Urdu and others.

**What is an advance directive and how is it different from the letter?**

The advance directive is a legal document that allows you to document your decisions about [end-of-life](https://www.nlm.nih.gov/medlineplus/endoflifeissues.html) care ahead of time. The language in advance directives is complicated. In contrast, the what-matters-most letter is simple and covers some important details that are not available in an advance directive.

**Is the what-matters-most letter legally valid?**

If you write it and sign it and have it witnessed by two people or if you have the Notary Public notarize your signature, the letter is legally valid.

**Can I complete both the what-matters-most letter and an advance directive?**

Certainly. There is a [free online Stanford form](http://med.stanford.edu/letter/advancedirective.html), which will ask you some questions. If you answer the questions and click “print” it will auto-fill your advance directives and the what-matters-most letter and you can email it or print it and share with your doctor and your family. This tool is also available as a free Stanford App in both the [Apple AppStore](https://itunes.apple.com/us/app/stanford-letter-project/id1010816774?mt=8) and the [Google PlayStore](https://play.google.com/store/apps/details?id=com.stanford.letterproject&hl=en). We recommend that you complete the what-matters-most letter and advance directive.

# Some important terms and meanings:

**Cardiopulmonary resuscitation (CPR)** – If a person’s heart stops or if that person stops breathing and the person has not indicated he or she does not want CPR, health care professionals usually try to revive him or her using CPR. In most cases when people have a terminal illness this is not successful. (You do

not need to have an advance directive to request a do-not-resuscitate order.)

**Artificial breathing** – If your lungs stop working properly, your breathing can be continued using a machine called a ventilator. A ventilator is a machine that pumps air into a person’s lungs through a tube in the person’s mouth or nose that goes down the throat. The machine breathes for a person when he or she cannot.

**Artificial feeding** – There are various methods to feed people who can no longer eat, including inserting a tube into the stomach through a person’s nose or through the abdominal wall to bring food and fluids.

**Dialysis:** If your kidneys stop working properly, your blood can be cleaned using a dialyses machine. The dialyses machine does the work of your kidneys. Most people have to go to a dialyses center and be dialyzed three times a week.

**A proxy** is someone you choose to "stand in" for you to make medical decisions if you become unable to make decisions for yourself. You can name your proxy decision makers in the What-Matters-Most letter and in your advance directives. If you do not name someone, then your healthcare team will choose a proxy for you, based on the regulations on the state you live in. It is very important that you tell your proxy about what matters most to you and help them understand your values and preferences. This way, your proxy can make decisions for you guided by your wishes when you are not able to make decisions for yourself. The What-Matters-Most letter helps you describe your values to your proxy.

**Palliative care:** Palliative care is treatment that focuses on relieving or reducing symptoms of a

Disease. Your doctor can work with you to make a plan to manage your symptoms, so that you get relief from the problems associated with those symptoms. You can receive both palliative care as well as treatment that are focused on controlling diseases like cancer, heart failure, dementia, ALS and others.

**Hospice care** is a type of care provided to a terminally ill patient. Hospice care focuses on enhancing the dying person’s quality of life rather than trying to prolong the dying process. Hospice care is usually provided in the home, but also can be provided in a hospital or nursing home.

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