

Planning Ahead

My Wishes

This leaflet documents my wishes and preferences that are important to me now and that I wish to be considered in the future

My Wishes Leaflet

This leaflet can be completed with your next of kin/ family/ carer/ representative or person who knows your wishes and preferences.

About me

My name..... DoB.....

I like to be called..... Tel.....

Tel..... NHS Number.....

What matters to me?

Who is important to me and knows my wishes?

The RUH, where you matter



What is important to me about my future care?

Include thoughts about treatment or future hospital care, what you would like to happen when your condition changes

Where is my preferred place of care when nearing end of life?

Important information that I have

- | | |
|--|-----|
| Lasting Power of Attorney for Health and Welfare | Y/N |
| Lasting Power of Attorney for Property & Financial Affairs | Y/N |
| Name of person who has Lasting Power of Attorney for Health and Welfare for me | |
| Recommended Summary Plan for Emergency Care and Treatment - ReSPECT plan | Y/N |
| Advance Decision to Refuse Treatment | Y/N |

Other thoughts/notes

Useful contacts

GP..... Surgery tel number.....
District nurse/community nurse.....
Tel number.....
Dorothy House Hospice 24 hour advice line Tel: **0345 0130 555**
Other hospice if appropriate.....
Other important contact number.....

Royal United Hospitals Bath NHS Foundation Trust
Combe Park, Bath, BA1 3NG
01225 428331 | www.ruh.nhs.uk

Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format, or would like to feedback your experience of the hospital.

Email ruh-tr.pals@nhs.net or telephone 01225 825656.

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The RUH, where you matter