

tha	t your	lov	ed	one	e w	as i	n tr	ie I	CU				
Q1a	How often of Please circle				appear	to hav	e his/he	r pain	under	control?	?		
	None of the	time				0							
	A little bit of	the tim	ne			1							
	Some of the	time				2							
	A good bit o	f the ti	me			3							
	Most of the	time				4							
	All of the tim	ne				5							
	Don't know					6	-	Go t	o quest	ion 2a			
Q1b	How would Please circle				ct of yo	ur love	d one's	dying	experi	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect
Q2a	How often of Please circle				appear	to hav	e contro	ol over	what w	vas goin	ıg on a	round	him/her?
	None of the	time				0							
	A little bit of	the tin	ne			1							
	Some of the	time				2							
	A good bit o	f the tii	me			3							
	Most of the	time				4							
	All of the tim	ne				5							
	Don't know					6	-	Got	o quest	ion 3a			
Q2b	How would Please circl				ct of yo	our love	ed one's	dying	experi	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect



Please					able to	o feed h	nim/her	self?					
None of	the tim	е				0							
A little b	it of the	time				1							
Some o	the tin	ne				2							
A good	oit of th	e time				3							
Most of	the time	Э				4							
All of th	time					5							
Don't kr	ow					6	-	► Go	to ques	stion 4a			
How we					ct of yo	our love	d one's	s dying	ı experi	ience?			
Terrible	. 0	1		2	3	4	5	6	7	8	9	10	Almos
													periec
How of	en did	your I		d one	appear		athe co	mforta	bly?				репес
	en did	your I		d one	appear	to brea	athe co	mforta	bly?				репес
Please	en did circle or the tim	your I ne num e		d one	appear		athe co	mforta	bly?				репес
Please None of	en did circle or the tim	your I ne num e		d one	appear	0	athe co	mforta	bly?				репес
Please None of A little b	en did circle or the tim it of the	your I ne num e e time		d one	appear	0	athe co	mforta	bly?				periec
None of A little b	en did circle or the tim it of the the tim	your I ne num e time ne time		d one	appear	0 1 2	athe co	mforta	bly?				periec
Please of None of A little be Some of A good	en did ircle or the tim it of the the tim oit of th	your I ne num e time ne time		d one	appear	0 1 2 3	athe co	mforta	bly?				periec
Please of None of A little but Some of A good Most of	en did bircle or the tim it of the f the tim bit of th	your I ne num e time ne time		d one	appear	0 1 2 3 4	athe co		bly?	stion 5a			periec
Please of None of A little be Some of A good Most of All of the	en did circle or the time it of the f the time bit of th the time ow	your I e num e e time e time	this	ed one		0 1 2 3 4 5	-	► Go	to ques				periec



How ofter Please circ				appear	to reer	at pead	ce with	ayıng	,			
None of th		nambo	,		0							
A little bit o	of the tir	me			1							
Some of the	ne time				2							
A good bit		imo			3							
-		IIIIC										
Most of the	e time				4							
All of the t	ime				5							
Don't knov	V				6	-	► Go t	to quest	tion 6a			
How woul				ct of yo	our love	d one's	dying	experi	ence?			
						_	0	_	0	•	10	Almos
Terrible	0	1	2	3	4	5	6	7	8	9	10	perfec
How ofter	n did yo	our love	ed one		to be <u>u</u>				8	9	10	perfec
How ofter Please circ	n did yo cle one e time	our love	ed one		• to be <u>u</u>				8	9	10	perfec
How ofter Please circ None of th	n did yo cle one e time of the time	our love	ed one		to be <u>u</u>				8	9	10	perfec
How ofter Please circ	n did yo cle one e time of the time	our love	ed one		• to be <u>u</u>				8	9	10	perfec
How ofter Please circ None of th	n did yo cle one e time of the time	our love numbe	ed one		0 1				8	9	10	perfec
How ofter Please circ None of th A little bit of Some of th	n did yo cle one e time of the time ne time	our love numbe	ed one		0 1 2				8	9	10	perfec
How ofter Please circ None of th A little bit of Some of th A good bit	n did your che one e time of the time of the time e time	our love numbe	ed one		0 1 2 3				8	9	10	perfec
How ofter Please circ None of the A little bit of Some of the A good bit	a did your che one e time of the time of the time time ime time	our love numbe	ed one		0 1 2 3 4		<u>l</u> of dyi			9	10	perfec
How ofter Please circ None of th A little bit of Some of th A good bit Most of the	a did yocle one e time of the time of the t e time ime	our love numbe me ime	ed one r	appear	0 1 2 3 4 5	unafraio	<u>l</u> of dyi	ng? to ques	tion 7a	9	10	perfec



How ofte Please cir				laugh a	and sm	ile?						
None of t	ne time				0							
A little bit	of the ti	me			1							
Some of t	he time				2							
A good bi	t of the t	ime			3							
Most of th	e time				4							
All of the	time				5							
Don't kno	W				6	-	- Go	to quest	tion 8a			
How wou Please cir				ct of yo	our love	d one's	dying	experi	ence?			
					_	5	6	7	8	0	10	Almos
Terrible How ofte	0 n did yo	1 our low	2 red one	3 appear	4 r to kee					9 spect?		perfec
How ofte Please cir	n did yo	our lov	ed one		r to kee						10	perfec
How ofte Please cir None of th	n did yo	our lov	ed one		r to kee							perfec
How ofte Please cir None of th	n did yo role one ne time of the ti	our lov	ed one		0 1						10	perfec
How ofte Please cir None of th	n did yo role one ne time of the ti	our lov	ed one		r to kee							perfec
How ofte Please cir None of th	n did yo role one me time of the time	our lov numbe	ed one		0 1							perfec
How ofte Please cir None of th A little bit Some of the	n did yo role one ne time of the ti he time	our lov numbe	ed one		0 1 2							perfec
How ofte Please cir None of th A little bit Some of th	n did yo	our lov numbe	ed one		0 1 2 3							perfec
How ofte Please cir None of th A little bit Some of th A good bi	n did yorde one time of the time tof the time e time	our lov numbe	ed one		0 1 2 3 4		r dign		self-res			perfec
How ofte Please cir None of th A little bit Some of th A good bit Most of the	n did yorde one time of the time tof the time time time	number me	ed one	appear	0 1 2 3 4 5 6	p his/he	r dign	ity and	self-res			perfec



	How often of Please circle				spend	time wi	th his/h	er fam	ily or fr	iends?			
	None of the	time				0							
	A little bit of	the tin	ne			1							
	Some of the	time				2							
	A good bit o	of the ti	ime			3							
	Most of the	time				4							
	All of the tim	ne				5							
	Don't know					6	-	► Go t	o questi	ion 10a			
	How would Please circle				ct of yo	our love	d one's	dying	experie	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almos
													•
I	How often o				spend	time ald	one?						•
I		e one i			spend	time ald	one?						<u> </u>
l	Please circle	e one i	numbe		spend		one?						<u>. </u>
ı	Please circle	time	numbe		spend	0	one?						
ı	Please circle None of the A little bit of	time the tine	<i>numbe</i> me		spend	0	one?						<u>'</u>
1	Please circle None of the A little bit of Some of the	time the time time	<i>numbe</i> me		spend	0 1 2	one?						
1	Please circle None of the A little bit of Some of the A good bit of	time the time time time time time	<i>numbe</i> me		spend	0 1 2 3	one?						
	Please circle None of the A little bit of Some of the A good bit of	time the time time time time time	<i>numbe</i> me		spend	0 1 2 3 4	one?	► Go≀	to quest	ion 11a			
	Please circle None of the A little bit of Some of the A good bit of Most of the	time the time time time time time time fithe ti time	numbe me ime	s aspe		0 1 2 3 4 5	-		•				



The following questions are answered with either a "Yes" or "No" based on whether your loved one did certain activities.

	ate the quali st <u>several</u> day	-	at aspe	ct of th	e dying	experie	ence. Ag	ain, we	are as	sking you	ı to foo	cus on	your loved
Q11a	Was your Please circ				r hugg	ed by h	is/her le	oved o	nes?				
	Yes					1							
	No					2							
	Don't know	'				3	-	Go to	o quest	ion 12a			
Q11b	How would				ct of yo	ur love	d one's	dying	experie	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect
Q12a	Did your lo				ye to lo	ved on	es?						
	Yes					1							
	No					2							
	Don't know	,				3	-	Go to	o quest	ion 13a			
Q12b	How would Please circ				t of yo	ur love	d one's	dying	experie	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect
Q13a	Did your lo				ny bad f	feelings	with of	thers?					
	Yes					1							
	No					2							
	Don't know	,				3	-	Go to	o quest	ion 14a			
Q13b	How would Please circ				t of yo	ur love	d one's	dying	experie	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect



14a	Did your love offering relige Please circle	gious o	spiritual			from th	e hospi	ital Cha	aplain o	equiv	alent	
	Yes				1							
	No				2							
	Don't know				3	-	► Go t	to ques	tion 15a			
14b	How would y Please circle			ect of yo	our love	d one's	dying	experi	ence?			
	Terrible) '	2	3	4	5	6	7	8	9	10	Almost perfect
15a	Did your lov Please circle Yes			ligious	or spirit	ual ser	vice/ce	remony	y before	his/he	er deat	h?
	No				2							
	Don't know				3	→	► Got	to ques	tion 16a			
5b				ect of ye	3	—▶ d one's						
5b	Don't know How would y Please circle	one nu		ect of yo	3	d one's				9	10	
	Don't know How would y Please circle	one nu	nber 2	3	3 our love	5	6	experi 7	ence? 8			Almost perfect
	Don't know How would y Please circle Terrible Did your lov	one nu	nber 2	3	3 our love	5	6	experi 7	ence? 8			
	Don't know How would y Please circle Terrible Did your lov Please circle	one nu	nber 2	3	3 pur love 4 al ventil	5	6	experi 7	ence? 8			
	Don't know How would y Please circle Terrible Did your lov Please circle Yes	one nu	nber 2	3	3 pur love 4 al ventil	5	6 espirato	experi 7 or) brea	ence? 8			
115b	Don't know How would y Please circle Terrible Did your lov Please circle Yes No	eed one	have a member	3 echanic	al ventil 2 3	5 lator (re	6 espirator	7 or) brea	8 athe for			



17a	Did your le				alysis fo	or his/h	er kidn	eys?					
	Yes					1							
	No					2							
	Don't know	/				3	-	Go	to ques	tion 18a			
17b	How would Please circ				ct of yo	ur love	d one's	dying	experi	ence?			
	Terrible	0	1	2	3	4	5	6	7	8	9	10	Almost perfect
	nswer either ' st of your love Did your lo	ed one's	s dying ne hav	experie	ence.		,			J		e the o	quality of
	Yes	ie one	numbe	Γ		1							
						•							
	NI-					_							
	No					2							
	No Don't know	ı				2	-	► Got	o quesi	tion 19a			
18b		d you r			ct of yo	3	—► d one's		•				
18b	Don't know	d you r			ct of yo	3	d one's		•		9	10	Almost perfect
18b 19a	Don't know How would Please circl Terrible Did your lease circle - for exam Please circle	d you released	1 ne disc	2 cuss hi	3 s/her w	3 our love 4 vishes felive care	5 or end	dying 6	experio	ence? 8			
	Don't know How would Please circl Terrible Did your le- for exam	d you released	1 ne disc	2 cuss hi	3 s/her w	3 our love	5 or end	dying 6	experio	ence? 8			
	Don't know How would Please circl Terrible Did your lease circle - for exam Please circle	d you released	1 ne disc	2 cuss hi	3 s/her w	3 our love 4 vishes felive care	5 or end	dying 6	experio	ence? 8			
	Don't know How would Please circl Terrible Did your lease circl Yes	d you it is let one oved o ple, resole one	1 ne disc	2 cuss hi	3 s/her w	3 our love 4 vishes folive care	5 or end	6 of life o	7	ence? 8			
	Don't know How would Please circle Terrible Did your later of the example as a circle Yes No	d you i	1 ne disc suscita numbe	cuss hiation or	3 ss/her w	dur loved 4 vishes feive care 1 2 3	5 or end	6 of life c	7 care with	8 ch his/ho			



In the moment before your loved one's death, was he/she: Please circle one number Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	How would Please circle Terrible In the more Please circle Awake	d you rate this cle one number 0 1	2 our love	3	3 ur love	5	dying	experie	ence?	9	10	Almo
How would you rate this aspect of your loved one's dying experience? Please circle one number Terrible 0 1 2 3 4 5 6 7 8 9 10 Alr per In the moment before your loved one's death, was he/she: Please circle one number Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	How would Please circular Terrible In the more Please circular Awake	d you rate this cle one number 0 1	2 our love	3	ur love	5	dying	experie	ence?	9	10	
Please circle one number Terrible 0 1 2 3 4 5 6 7 8 9 10 Alr pel In the moment before your loved one's death, was he/she: Please circle one number Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	Terrible In the more Please circo	0 1	2 our love	3	4	5	6			9	10	
In the moment before your loved one's death, was he/she: Please circle one number Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	In the mor Please circ Awake	ment before yo	our love					7	8	9	10	
Please circle one number Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	Please circ			ed one'	's deatl	ı, was h	ao/oho:					
Awake 1 Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number	Awake	cle one number	•				ie/Sile.					
Asleep 2 In a coma or unconscious 3 Don't know 4 Go to question 22 How would you rate this aspect of your loved one's dying experience? Please circle one number Torrible 0 1 2 2 3 4 5 6 7 8 0 10 Alr												
In a coma or unconscious 3 Don't know 4	Asleep				1							
Don't know 4					2							
How would you rate this aspect of your loved one's dying experience? Please circle one number Alr Alr Alr	In a coma	or unconscious	3		3							
Please circle one number Torrible 0 1 2 2 4 5 6 7 9 0 10 Alr	Don't know	1			4	-	- Go t	o quest	ion 22			
				t of yo	ur love	d one's	dying	experie	ence?			
	Terrible	0 1	2	3	4	5	6	7	8	9	10	Almo



Rate the care your loved one received from all doctors and other health care providers (including nurses and other health care professionals) during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	Rate the care your loved one received from all doctors and other health care providers (including nurses and other health care professionals) during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet.	Overall, Please c					ne qual	lity of y	our lov	ed one	s dying	g? 			
(including nurses and other health care professionals) during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	(including nurses and other health care professionals) during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	Terrible	0		1	2	3	4	5	6	7	8	9	10	Alm
healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Rate the care your loved one received from his/her doctor during the last several days of his/her life while in the ICU. Please circle one number Worst healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	(includir his/her l	ig nui ife wh	rses a nile in	and o	other he									
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healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	healthcare 0 1 2 3 4 5 6 7 8 9 10 heal possible Thank you for taking the time to complete this survey. If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	his/her I	ife wh	ile in	the	ICU.	receive	d from	his/her	doctor	during	the las	t seve	ral day	s of
If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.	If you have any comments, please feel free to add them to the margins of the survey or to the space below, or call to talk with study staff. Contact details are provided on the Information Sheet. Thank you again for your help.					2	2	1	5	6	7	8	9	10	
		possible			Th	ank yo	u for ta	king th	e time	to comp	olete th	is surv	-		pos
	Comments	possible			Th ny co oi	ank you	u for ta ts, plea space etails a	king th ase feel below, are prov	e time i free to or call vided o	to comp add the to talk t	olete th em to t with stu format	is surve he març udy stat	gins of ff.	the su	pos
		possible If y	ou ha	ave ar	Th ny co oi	ank you	u for ta ts, plea space etails a	king th ase feel below, are prov	e time i free to or call vided o	to comp add the to talk t	olete th em to t with stu format	is surve he març udy stat	gins of ff.	the su	pos
		possible If y	ou ha	ave ar	Th ny co oi	ank you	u for ta ts, plea space etails a	king th ase feel below, are prov	e time i free to or call vided o	to comp add the to talk t	olete th em to t with stu format	is surve he març udy stat	gins of ff.	the su	poss
		possible If y	ou ha	ave ar	Th ny co oi	ank you	u for ta ts, plea space etails a	king th ase feel below, are prov	e time i free to or call vided o	to comp add the to talk t	olete th em to t with stu format	is surve he març udy stat	gins of ff.	the su	poss