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# LVAD AND YOUR VALUES

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Some people have found that thinking about the following values helps them decide whether to get an LVAD. Being clear about what you value can also help you when you talk with your healthcare team. This tool helps everyone understand what's most important to you.

Look at each value in the first column and decide how much it matters in your LVAD decision.

Then circle the number in the second column that reflects how important that value is to you. **The numbers range from 0 (for a value that isn't important at all to you) to 5 (for a value that is extremely important to you).**

You can use the ruled line to write down your thoughts about each value.

When you are finished, talk about your answers with your doctor.

## BENEFITS OF LVAD

## HOW MUCH DOES THIS MATTER FOR YOUR DECISION?

Please circle a number 0 (none) – 5 (a lot)

**Extending your life for a few more years**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_  
\_\_\_\_\_

**Bridging to a transplant**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_  
\_\_\_\_\_

**Improving heart failure symptoms such as shortness of breath, weakness,  
and swelling so that you feel better**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_  
\_\_\_\_\_

**Increasing your mobility for simple activities such as cleaning house,  
preparing meals, and going to the grocery store**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_  
\_\_\_\_\_

**Increasing your mobility for more involved activities such as taking  
longer trips, going on a cruise, and participating in non-contact sports**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_  
\_\_\_\_\_

## RISKS OF LVAD

### HOW MUCH DOES THIS MATTER FOR YOUR DECISION?

Please circle a number 0 (none) – 5 (a lot)

**Spending a long time in the hospital or rehabilitation center after surgery**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

**Having to go back into the hospital for problems such as driveline infections or internal bleeding throughout life with an LVAD**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

**Having a disabling stroke**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

## DAILY CHALLENGES

### HOW MUCH DOES THIS MATTER FOR YOUR DECISION?

Please circle a number 0 (none) – 5 (a lot)

**Dealing with daily lifestyle changes such as cleaning the driveline, making special preparations for showering, and carrying the device and batteries**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

**Increasing dependence on others**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

**Affecting your caregiver's life because of the time and energy needed for your care**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

**Dealing with expenses for LVAD maintenance such as medicines, co-pays, dressings, and gas for traveling to appointments**

**0 1 2 3 4 5**

Why does this matter? \_\_\_\_\_

### MORE INFORMATION ONLINE

For videos of patients and additional information about this kit, visit the LVAD Decision Aid website at [lvaddecisionaid.com](http://lvaddecisionaid.com)