W I S H F U L. thinking:
Dental Advance Care Planning Tool

WORRIED
Is something bothering me?
Who will take me to the dentist?

IDEAL
What quality of life issues are important to me?
What foods do I love to eat?

STRENGTHS
What do I bring to the “table”
What is working? Now? Will it still work in future?

HEALTHY
What are my current health concerns?
What prescriptions or treatments am I taking?

FINANCIAL
Do I have dental Insurance?
How are my bills getting paid?

UNDERSTAND & APPRECIATE
Can I understand the dental decisions and costs?
Can I appreciate the importance of the dental decision?

LAW
Do I have an up-to-date power of attorney?
Do I know who my legal substitute decision-maker is?

Your Mouth - Your Choice!
Talk to your friends, family, substitute decision maker or dentist about your dental advance care plan.

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