

## Surgery

### How are you doing?

Name:

Completed with (e.g. family, carers):

Date:

This support tool is designed to help you and your family and carers think about how things are at the moment and share any ideas you have that you think would help you to live better with cancer. Please take your time to think through the questions and write down any thoughts and ideas you have. You can then discuss these ideas with your doctor or nurse when you have your next review.

#### How are you doing?

Overall, how do you feel you are coping at the moment?



I am not coping so well



I am doing OK



I feel well

#### Do you have any concerns?

These are some things we know can be important to people living with cancer. Please highlight the areas of particular concern to you at the moment.

**Please tick any which apply to you**

Physical symptoms (Please give details)

Lack of control

Feeling down or stressed

Prognosis – the future

My current care package

Lack of control

Finances & Housing

Taking medications/side effects

Support for my family or carers

Likely treatment choices

Eating and drinking

Lifestyle issues

Social isolation

Work-related issues

Mobility

Travelling for appointments/treatment

**How can things be improved?**

There might be some areas where you feel that things could be better, to enable you to live better with cancer. Please write down any relevant thoughts and ideas.

**What is important to you to help you to live better with cancer?**

**Do you have any questions that you would like answered?**

**Is there anything that you feel isn't working so well?**

**What needs to change to enable you to live better with cancer?**

**Do you have any ideas about how you can live better with cancer?**

**How can ideas be turned into actions?**

An Action Plan can be completed with you doctor or nurse, to list things that can be done to help you live better. It will be based on the information you provided and discussions with your doctor or nurse, e.g. thing to help you self manage, sharing information about what support is available, or referring you to other services. If you have any ideas please also note them down.

You can keep a copy of your action plan, and use it to review your progress at future appointments.

**Action Plan**

Issue /Concern	Actions	Comment