The physician may observe that the body of an annual physical, and is relevant to adults of all ages. should succinctly explain that ACP is a routine segment agent. Furthermore, before the discussion, the physician provides an individual’s instructions regarding his/her future medical care and identifies the health care proxy. The ACP discussion both educates and explores the importance of discussing advance care planning (ACP) as part of routine health care maintenance, we wonder about linking them to “annual physical” appointments. Many family physicians integrate preventive care longitudinally; the challenge, it seems to us, is to make the time to discuss document ACP some.

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Response: Re: A Reflective Case Study in Family Medicine Advance Care Planning Conversations
To the Editor: We appreciate Dr. de Capraris’ thoughtful comments on our article. Indeed, we agree with nearly all them!
We do have 2 comments in return:
First, we suspect many practicing family physicians will find the suggestion of discussing Advance Care Planning (ACP) with all adults somewhat overwhelming. While we strongly encourage our colleagues to do that, we believe that targeting people over 65 years of age and patients of any age with serious acute or chronic illness is an alternative, pragmatic approach.
Second, although we absolutely support including ACP conversations as part of routine health care maintenance, we wonder about linking them to “annual physical” appointments. Many family physicians integrate preventive care longitudinally; the challenge, it seems to us, is to make the time to discuss document ACP some-