will be used to identify and measure utilisation of ACP documentation, Hospice enrolment and chemotherapy administration within last 14 and 30 days before death within an urban oncology practice. Patients with stage IV colon, lung, breast, and pancreatic cancers will be the population of interest. Additional variables of focus include ACP office visits, website hits, and dissemination of ACP documentation will be measured to assess strategies. Results will be reported as a percentage of utilisation capture of the selected variables within stage IV colon, lung, breast and pancreatic cancers within the practice. Increased awareness of ACP documentation in the EHR for patients with terminal cancers is essential. Documentation allows the patient to direct their care and outcomes to medical staff. Development of strategies for increased awareness and compliance with ACP could improve care delivery to patients with terminal cancer. By incorporating these strategies with definable metrics, strategic intervention can be measured and reported. Further study of the relationships between ACP documentation and patient outcomes is necessary for comprehensive oncology care.