

# Envisioning the Future



# 2020 & BEYOND

## Session Takeaways

D4 Person-Directed End-of-life Care. What I Learned from my Spouse Transformed Me.

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- The patient alone decides what will happen at the time of his/her death, even if they are getting closer to death, every effort should be made to honor a requests such as the desire to do something one more time.
- When someone decides their own care then that care is patient centered.
- When making a medical decision the first step is to ask the patient.
- An example of how to support the patient's preference would be that if they have expressed a preference regarding the type of television show they prefer to watch while resting, and the spouse is visiting and wants something different, the care giver should sit down with the spouse and discuss the patient's desires.
- A loved one of a patient in hospice should accept and support the patient's treatment decisions, even if the loved one does not agree.
- Listening to the patient very important - i.e. If a patient in hospice starts crying and says that he/she does not want to die, the care giver should sit down with the patient and listen.
- A hospice patient should be given pain medication as ordered even if the loved one caring for him/her would prefer to withhold medication that would cause the patient to sleep instead of talking with the loved one.
- If a loved one in hospice is becoming very angry and no longer wants the hospice nurse to visit because they are tired about hearing that he/she is dying, encourage the patient to talk to the hospice nurse about his/her feelings.
- If you are afraid of having your loved one die at home, even if that is what the patient desires, talk to the hospice nurse about those fears.