



Patient – Mr Green

Mr Green is **82 years old** and has a history of increasing **breathlessness**, and **congestive cardiac failure**. He has been admitted to hospital three times in the last nine months. **On his previous admissions**, Mr Green felt **scared, alone**, and **not sure** what would happen to him.



end of life
ESSENTIALS®



1

END-OF-LIFE DISCUSSIONS

Mr Green reflects on the impact **recent improvements** in his care have had on him and his family.

?



The doctor **asked** about my **previous admissions**. It was the **first time** a doctor had asked me if I had **any questions**.

2

COMMUNICATION

My doctor pulled up a chair, **showed respect**, and was willing to **listen** to **what mattered most** to me and my family.

As my illness progressed, the doctors **communicated** the **next stage of care** and what to expect.



3

PERSON-CENTRED CARE

Being involved in **family meetings** with all the **health professional team**, I felt **informed** and in control of my care. **My voice mattered**.

The doctor asked me if I wanted to discuss the future, I said yes! The words **'death' and 'dying'** were used when discussing my prognosis and care plan. This **allowed me to share my fears** and **wants** with the medical team and my family.

Eating solid foods became hard. I heard the doctor speaking to the nurse about a feeding tube. The **nurse advocated for me**, responding "Have you asked Mr Green what he wants?". Eating food was more important to me than having a tube down my throat, so they arranged different types of foods for me to eat. **I felt that what I wanted, mattered**.

The **kindness** I was shown **made all the difference** to me and my family.

