Northern Health Palliative Care

Final Days

Death in advanced illness is usually a gradual process involving the shutting down of body systems

As Death Approaches:

- Food and fluid intake will be reduced
- Tires easily and sleeps for longer periods
- Unable to do personal care or ADL's
- Usually become confined to bed and unable to transfer or reposition self
- Urine output will decrease or be absent
- May become incontinent
- May become restless which can vary from mild to extreme

- May be confused about time, place, people, and their surroundings
- May see/hear people that others cannot
- Breathing will become irregular and shallow and may sound wet or noisy
- Will no longer be able to take medications by mouth and will need regular mouth care
- Hands and feet become cool to touch and skin may be mottled
- Decreased level of consciousness

Care in the Final Days:

- Anticipate and prepare for an alternate route for essential drugs
- Continue with essential medications: those for pain, dyspnea and restlessness
- Encourage short conversations during wakeful times
- Reduce bathing to a minimum and patient preference
- Gently reposition frequently
- Prepare and educate the family regarding normal physical changes they may see
- Prepare the family regarding what will happen as death occurs and the days following

References:

Downing M, Wainwright W. (2002) Victoria Hospice society. Medical Care of the Dying. 4th ed. NHPC Symptom Management Guidelines (2008) <u>Food and Fluids at End of Life</u> <u>My Loved One is Dying</u>