

What to do Immediately After Your Loved One Has Died

Know that there is no right or wrong way to be at this time. Do what you feel is right for you and not what you may feel is expected of you.

You may wish to spend time with your loved one and you can take as much time as you need. For some this may be hours, while others may not wish to stay. Do not be afraid to touch, hug or kiss the person. Some people may wish to lie down beside him/her. These reactions are normal. Please be aware that others may have needs which are different from yours, so be sensitive to and supportive of their special concerns.

For some prayers are very important, but unnecessary for others. Be guided by your inner self and do what is right for you.

It may be necessary for you to attend to special cultural needs at this time, depending on your family's beliefs and values. Do whatever it is that you need to for your loved one and yourself.

Funeral Planning and Final Arrangements

It is important to know what your loved one's wishes are. Some individuals and families may decide to make funeral arrangements ahead of time. There is no right or wrong way to approach this. Some individuals like to know they have made their own arrangements and will reduce the stress on their family at the time of their death by not having to make arrangements, other families make the funeral plans after death. Knowing what your loved one's wishes are is important for you and your family to make plans accordingly.

St. Joseph's Care Group

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Mission

St. Joseph's Care Group is a Catholic organization that identifies and responds to the unmet needs of the people of Northwestern Ontario, as a way of continuing the healing mission of Jesus in the tradition of the Sisters of St. Joseph of Sault Ste. Marie.

Vision

A leader in client-centred care.

Core Values

*Care
Compassion
Commitment*

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We would like to acknowledge that the original pamphlet was created by the Palliative Pain and Symptom Management Program.

Cette information est disponible en français sur demande.



When Someone You Love is Dying



Information About the Final Days to Hours of Life

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Introduction

This pamphlet has been designed to assist you in understanding what to expect in the hours to days ahead. While the following information may be difficult for you, please know that the intention is to help prepare you for what to expect.

Your physical and emotional well being is as important as that of the dying person. Please be aware that not all the described signs of approaching death will be seen in every dying person. If you have questions or concerns about the care of your loved one, please discuss these with your doctor or nurse.

Signs that Death is Approaching and Helpful Responses

Sleeping

Your loved one may spend an increasing amount of time sleeping, and appear to be difficult to arouse. This normal change is due in part to the changes in the body's metabolism.

Help by: Sit with your loved one; hold his/her hand, but don't shake it or speak loudly. Speak softly and naturally. Spend time with your loved one at times when he/she is more alert or awake. Avoid speaking about the person in his/her presence. Speak to him/her directly even if there is no response. Never assume that he/she can't hear.

Confusion

Your loved one may seem confused about the time, place, and identity of people around them, including close and familiar people. This is also due to metabolism changes.

Help by: Identify yourself before you speak, rather than asking the person to guess who you are. Speak softly and clearly.

Restlessness:

Your loved one may make restless, repetitive

movements such as pulling at the bed linen or clothing. This may be due to decreased oxygen circulation to the brain.

Help by: Don't interfere with or try to restrain these movements. Speak quietly and naturally; lightly massage the forehead; read to the person or play soothing music.

Reduced food and fluid intake:

The person may want little or no food and fluid.

Help by: Recognize this as a normal part of the dying process. Do not try to force the person to take food and/or fluid. To do so would increase the person's discomfort. Small amounts of a desired food, or ice chips will usually suffice.

Coolness:

The hands, arms feet and then legs may be increasingly cool to touch. The face may be pale, and the feet and legs a purple-blue mottled colour. This indicates that the circulation of blood is decreasing to the body's extremities and is being reserved for the most vital organs.

Help by: Keep the person warm with blankets, using just enough to keep him comfortable. Avoid using an electric blanket.

Incontinence:

The person may lose control of bladder and bowels as the muscles in these areas begin to relax. These symptoms occur commonly when death is imminent.

Help by: Ask the nurse to suggest appropriate padding, and/or use of an incontinence product.

Congestion:

There may be loud gurgling sounds coming from the person's throat or chest. This is because your loved one is unable to swallow saliva, and

doesn't mean she/he's uncomfortable.

Help by: Avoid suctioning, as this may cause sharp discomfort. Turn the person's head to the side and allow gravity to drain the saliva. You can wipe the mouth with a moist cloth.

Changes in Breathing Pattern:

Breathing may be irregular and may stop for 10 to 30 second periods. He/she may experience periods of rapid, shallow pant-like breathing. After death there may be a "last sigh" or gurgling sound. These common patterns are due to decreased circulation to the internal organs.

Help by: Raising the head of the bed or turning the person to the side. Hold your loved one's hand and speak softly.

Decreased Urine:

Urine output normally decreases and may become tea coloured or concentrated. This is due to the decreased fluid intake as well as a decrease in circulation to the kidneys.

Help by: Ask your nurse if anything needs to be done.

Visual-Like Experience:

The person may speak or claim to have spoken to a person already dead, or to see places/people not visible to you. This isn't a drug reaction or hallucination. The person is detaching from this life, and is being prepared for the transition so it will not be frightening.

Help by: Accept what the person is saying. Avoid explaining away or arguing. The experience is real to your loved one.