



Benton
Hospice
Service

THE HOSPICE EXPERIENCE
Generations (Gazette-Times and Democrat-Herald)
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Hospice was created to provide assistance to the dying. From the first visit to the last, the hospice nurse works to provide care, comfort, and companionship to the client and caregivers. This is one nurse's story.

I pull into your drive, turn off the ignition and double check your name, age address, diagnosis, prognosis and doctor. I see that you have fought a long fight: you have tried everything that there was to try, plus a couple treatments that some would call questionable. I pick up my nurse's props: my stethoscope and blood pressure cuff. Sighing, I reach for the handle of the car door and think, "the first hospice visit is the most difficult of all."

You respond to the knock on the door with the shuffle-shuffle-clunk, shuffle-shuffle-clunk of a walker, which tells me you are still up and around. You answer the door; we pretend that I'm just any other slightly unwelcome visitor, maybe a life insurance salesman. I introduce myself; you introduce yourself. I search nervously for something that will provide a connection. I say, "That's a cool bird feeder, where did you get it?" I listen to your reply carefully, seeking clues to tell me who you are. Behind your graciousness is a recognizable glimmer of anger. I represent failure; failure of the doctor, failure of your medication, but even more, failure of your body to respond to your desire to live longer.

I get out my stethoscope and blood pressure cuff and take your vital signs. Not because I need the information necessarily, but because you need me to take them. Eventually, I will only take your pulse and blood pressure if I'm going to do something with the information. But for now, it eases the transition from a medical model of death as failure, to a holistic model of death as part of life.

When asked, you tell me that you are most afraid of dying in pain. I will give you information that you will forget, about pain and pain control. I will also give you something that you will not forget. I will tell you that I will be with you through all of this. I will work my butt off to make certain that you are not in pain. I will say butt, because it will shock you just a bit and that will help you remember when you wake up afraid in the middle of the night.

You are weary. I gather my props and make certain that you have the hospice phone numbers posted prominently. I ask you if there is anything that I can do for you, because I want you to feel like you are in control, that you are the "boss." I tell you that I will call you tomorrow to see how you are doing.

I am a bit worn out, too. I walk slowly to the car, sit behind the wheel and take a couple of deep breaths. I make a few notes and a reminder to call you tomorrow. I wonder if your relentless fight for life will prove hard for you to give up. I wonder if I will be up to the task of really being there for you. "I hate the first visit," I say again to myself. "It is always the hardest."

Six months later, forever in the terms of hospice work, I get a call from the hospice office. Your caregiver believes that your time is close and would like for me to stop by. As I pull into your driveway, I have no need to check your name or diagnosis. I ignore the nurse's props, and hop out of the car. I walk briskly to the door, knock, call out and stroll right on in. Your daughter-in-law greets me with a tired smile; she's ready for some support. While I am here, she trusts that I will take care of things, make decisions, and share her burden.

I find something that she is doing to praise. Feeling that one has done a good job eases the grief experience. We chat about the signs and symptoms of impending death and how all that is happening to you is a normal, natural process. It is nothing of which to be afraid. I do all I can to ease her fear.

I ask to have a little time alone with you. I sit on your bed, the one that you and I moved closer to the window, so that you could see your birds. You are very still; your features peaceful. You do not appear to be in pain. I move in close and cradle your cool hand. I thank you for sharing this intimate time with me. I tell you how lucky I've been to get to know you and what a good job you have done. I tell you that your job is over now. It is okay to let go. I tell you good-bye. I do this not only because it is true; but also because it will ease your transition from life to death.

As I leave, I remind the caregiver which nurse is on call. I tell her if she should become frightened, or should you die, to phone us. I tell her that I think that it will not be long. I walk to the car. I sit there and take a couple of deep breaths and reflect on our journey toward death. I put the car in reverse and roll backward out of your driveway.