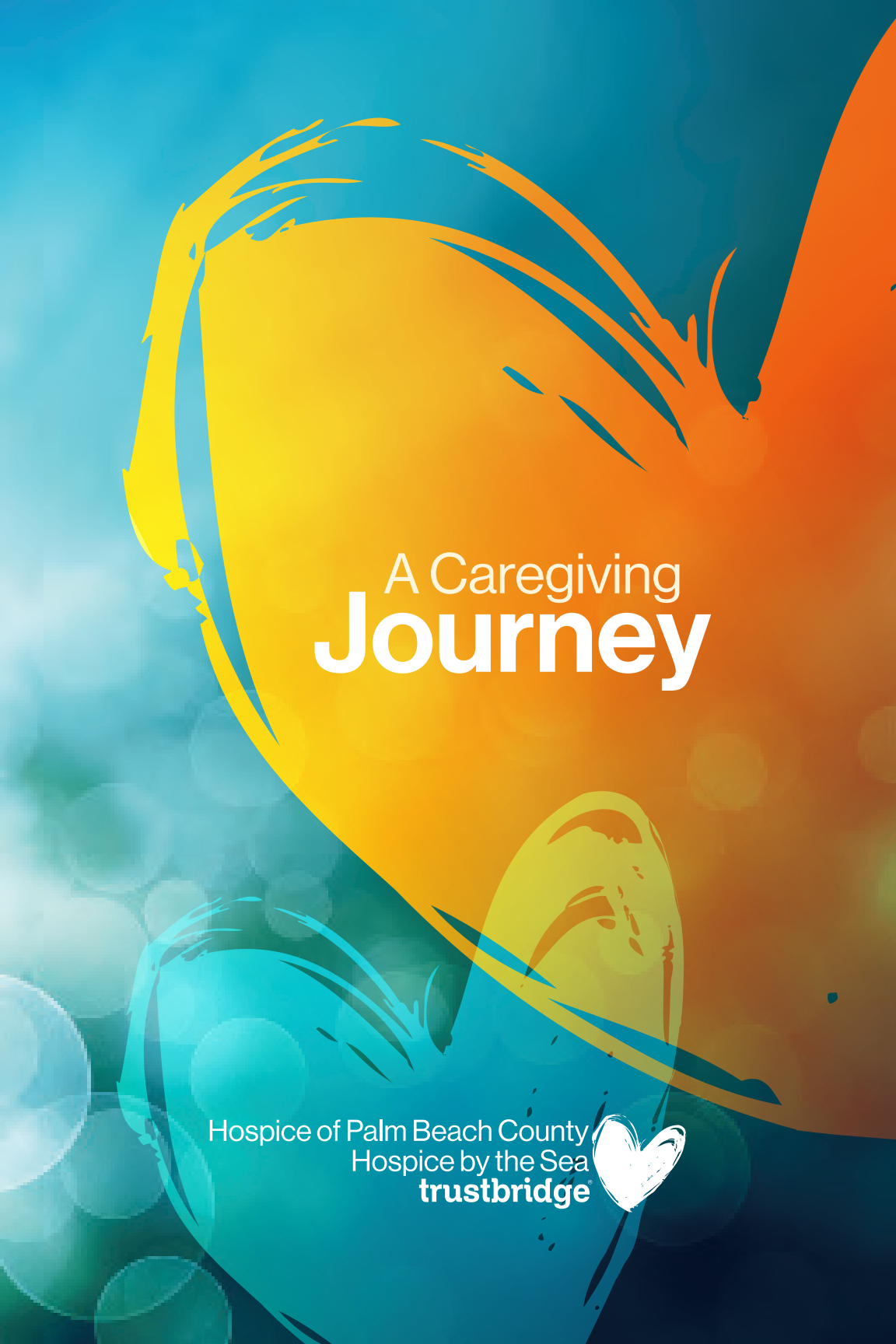




A Caregiving **Journey**

Hospice of Palm Beach County
Hospice by the Sea
trustbridge



A Caregiving Journey

Caring for Your Loved One and Yourself

Care is a state in which something
does matter; it is the source of
human tenderness.

— Rollo May

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A Letter from Trustbridge

Dear family and friends:

We know that your caregiving journey can be a difficult and personal time for you, your loved one and your family. We also know that you are doing everything you can to care for your loved one, but be assured you do not have to do it alone.

Your lives matter to us at Trustbridge. We are here to care for your loved one for the rest of his or her life. We are also here to guide and support you and your family whenever you need us. We will answer your questions, provide the information and equipment you need, and train you so you can feel comfortable in your caregiving role. We are also committed to caring for you and your family emotionally and spiritually.

It is our goal to lift many of the caregiving challenges off your shoulders so you and your family can enjoy life's moments together. If you have a concern, it is our concern, too. Since 1978, we have helped 200,000 patients and the families who care for them, so you can count on us to support you along this journey.

“ Not only did you take care of my mother’s physical needs, but you also provided psychological support for me, teaching and guiding me on how to better care for her and enabling me to become more confident in my abilities as a caregiver.

– Linda S.

”





The Importance of Caregiver Health

When a loved one becomes ill, caregivers spring into action. Your efforts to make your loved one comfortable are so important. However, while you are busy taking care of another, it is easy to forget about your own needs. That's why we encourage you to take good care of yourself every step of the way. When you do, your loved one will also benefit.

The Physical Effects of Caregiving

Did you know that the demands of caregiving can put your health at risk? Be aware that caregivers may develop one or more of the following conditions—if they don't remember to practice self-care:

- ♥ Stress
- ♥ Elevated blood pressure
- ♥ Physical exhaustion
- ♥ Anxiety and depression
- ♥ Alcohol and drug abuse
- ♥ Neglect of important personal health/medical needs

Practical Tips for Reducing Stress

There are many things you can do to safeguard your health. The following are a few stress-reducing ways to preserve your strength and well-being:

- ♥ Resolving to make self-care a priority.
- ♥ Learning breathing techniques and/or meditation to help calm your mind and relax your body. (Even a minute can be helpful.)
- ♥ Stretching gently in the morning and throughout the day.
- ♥ Exercising to release body tension and to activate feel-good body chemicals a few minutes each day if possible.
- ♥ Eating nutrient-rich foods, which can reduce stress and keep your body strong.
- ♥ Smiling (even if you don't feel like it) to increase feelings of relaxation.
- ♥ Creating a soothing sleep ritual to help you unwind and get the rest you need.

The Emotional Effects of Caregiving

Seeing your loved one feeling uncomfortable and/or unable to care for himself is sad and disconcerting. The demands of caregiving can be so great that you may also feel overwhelmed or hopeless. Then, as you take on more responsibility, you may feel angry with yourself for having normal reactions to stress, such as impatience, anxiety, or resentment. Those are a lot of emotions! Be compassionate with yourself. Assure yourself that these feelings are normal and, please, lean on us for emotional support.

You may question whether you have done all you could or made the right decisions. Give yourself credit for making the best decisions you could with the best intentions. By entering hospice care, you are honoring and caring for your loved one so that the person's symptoms can be managed in a comfortable and comforting setting. We will help you to understand what is happening, to prepare you for what's ahead, and to guide you in making decisions with love and compassion.

***We provide emotional and spiritual support for your entire family.
Let your hospice team know how we can help you.***

Asking for Help

Although you may not be accustomed to asking for help, it is essential for your overall well-being to reach out to others from time to time to help conserve your strength and find the comfort and peace *you* need.

Go ahead and accept offers from friends, family and others to assist with your loved one's daily care needs. It is perfectly okay to need and accept a helping hand. Make a list of tasks that others can help you with and be specific when someone offers assistance.

There will be times when you need a break from your caregiving role. Maybe you need to go to the doctor, get a haircut, or just have lunch with a friend. Our hospice volunteers can provide you with that much-needed break so that you can take care of yourself, whatever that entails.

Guidance for Communicating with Children

If you are concerned about talking to the children in your family about your loved one's condition, you are not alone. What we say about advanced illness or impending death to children depends on their developmental ages and experiences. It also depends on the beliefs and feelings of your family.

You can encourage communication by showing interest and respect for what children have to say. Communicating in an open and honest way with children makes it easier for them to talk about their feelings and not feel confused about what is going on around them.

It is important to talk to children about the illness and about dying when the time comes. Through this dialogue, you can discover what children know and do not know—if they have misconceptions, fears, or worries. Allow children *not* to be brave. Family members, as well as your hospice team and social worker, can help by providing needed information, comfort, and understanding.

Common Anticipatory Grief Reactions in Children

Children may demonstrate the following feelings and behaviors when a loved one is terminally ill or nearing the end of natural life. Being familiar with this list can help you better understand what the children in your loved one's life are going through:

Aggressiveness	Fear	Poor concentration
Agitation	Forgetfulness	Regressive behaviors (baby talk, bed-wetting, thumb-sucking)
Anger	Guilt	Sadness
Anxiety	Hyperactivity	Shyness
Appetite change	Insecurity	Sleep changes
Confusion	Lethargy	Thoughts about death
Crying	Loneliness	Withdrawal/isolation
Denial	Numbness/shock	
Embarrassment	Physical symptoms	

Common Concerns Expressed by Children:

- ♥ Worry—i.e., “What will happen to me?”
- ♥ “How can I help?”
- ♥ “How can I stop this?”
- ♥ “Did my behavior cause the illness?” Or, “Is it my fault?”
- ♥ “Can I catch it?”
- ♥ Extreme concern for the dying person
- ♥ Adjusting to the changes caused by the illness
- ♥ Preparing for death

Common Physical Sensations Children Experience:

- ♥ Headaches
- ♥ Stomachaches
- ♥ Nausea
- ♥ Muscle aches
- ♥ Dizziness
- ♥ Increased energy
- ♥ Taking on the symptoms of the dying person

Talking Tips for Caregivers

Open a dialogue. When talking to a child about a dying loved one, it is recommended to frame the conversation as “opening a dialogue,” to encourage two-way conversations. It is essential that adults use the word *hospice* when talking to children and that they explain what *hospice* means. It is helpful to explain that *hospice* refers to people who help care for a dying person and the person’s family. It is also helpful to define *disease* as a sickness that makes a person’s body not work very well, and that *death* is when the body stops working all together. For example, “Your loved one has been very sick and the medicine is not working, and the doctors have done everything they can do.”

The simple answer is the truth. When families are dealing with a loved one's terminal illness and impending death, parents, grandparents and guardians are understandably concerned about what to tell the children. The simple answer is to tell the truth. Doing so can be difficult because adults generally try to protect and shield children from painful news. It can also be a time when they may not have or know all of the answers.

It's okay to say, "I don't know." It is always okay to say you don't know. For example, stating, "We don't know when she will die" is certainly appropriate. Be sure to nurture and support the child, and allow him or her to express raw feelings freely. Let the child ask questions, while being supportive and gentle. Always provide reassurance that the child will be cared for. It is helpful to explain the plan of what will happen to the child when the loved one dies.

Be gentle and supportive. It is important that adults answer the questions children and teenagers ask in an age-appropriate manner, with gentleness, support and care. It helps to recognize and draw on the child's experiences with illness and death as a frame of reference.

The language you use is very important. Adults should use the name of and explain the nature of the illness. Use simple, concrete language and avoid euphemisms. For example, use the word *dying*, not "going to sleep" or "passing on." These vague descriptions can be frightening, possibly causing the child to be afraid to go to sleep at night. Listen, offer reassurance, and answer questions honestly, simply, clearly, and concisely, with gentleness and care. Do not go into more detail than the child requests. After the initial conversations/discussions, give children time to adjust, ask questions and share concerns.

“Never underestimate the difference you can make.”

– Quint Studer



Structure, Routine, and Choice

Routines

As much as possible, give children structure and routine. These can help them feel safe during this time when things may feel uncertain. At the same time, it is good to discuss changes and give children choices about what they want to do and how they want to behave. Some children want to go to school during this time; some may not. Giving a child the ability to make choices will help him or her feel empowered and more in control.

Invite the Child to Help

Never force a child to have contact with the dying loved one. Instead, invite him or her to be part of the care in a way that fits for the child.

Follow the Child's Lead

Prepare the child for what to expect (for example, hair loss, wheelchairs, hospital smells) and adapt your schedules and routines to the child's needs where possible.



Caring for Your Loved One

Throughout the rest of this booklet, you will find helpful information and instructions for caring for your loved one. Please remember that you aren't expected to do everything alone. Turn to your hospice team for support and information any time you are in need. **You can reach us 24 hours a day at 888.441.4040 if you have any questions or concerns.**

General Caregiving Guidelines

It is difficult to see a loved one become unable to handle his or her daily basic needs. During this challenging time, your love, support and comfort become even more important. Keep the following general guidelines in mind as you care for your loved one and yourself:

- ♥ Your loved one may want you to do things that the person is able to do on his or her own. It is always a good idea to encourage your loved one to be as independent as possible.
- ♥ You may have difficulty watching your loved one struggle to complete a simple task. Try to be patient and allow the person the time necessary to complete the task.
- ♥ Don't forget that your well-being is essential! Get adequate rest and nutrition and let others help (read "The Importance of Caregiver Health" on page 6). Take care to follow our guidelines for preventing injury to yourself when physically assisting your loved one (see "Body Mechanics/Positioning" on page 22).
- ♥ Take some special time for yourself each day, even if it is brief. Don't give up celebrating important occasions and holidays. Remember: You can't be a caregiver if you don't take care of yourself.

Activities of Daily Living

Activities of daily living (ADLs) are those things we normally do for ourselves. They include bathing, brushing teeth, dressing, walking, eating and going to the bathroom. Your loved one may need help with these activities.

Important Tips:

- ♥ Encourage independence whenever possible; it is a basic need.
- ♥ Maintain as normal a routine as possible. Allow your loved one as much control over these activities as possible.
- ♥ Respect your loved one's privacy; we all wish to maintain our dignity no matter how ill or dependent on others we become.
- ♥ Encourage others to be as involved as your loved one is comfortable with. It is okay to need and accept help.

Walking/Ambulation

Most activities require walking and moving about. Your loved one may become weak, have difficulty walking or be unable to walk. Formerly simple tasks like getting out of bed or a chair can become challenging. We want to help you prevent your loved one from experiencing a fall or injury.

Important Tips:

- ♥ Walking requires strength and balance. Your loved one may be weak and unsteady from being in bed or from feeling ill.
- ♥ Be aware of your loved one's limitations and do not rush him or her. Your help or an assistive device such as a gait belt, walker or cane may be needed. Please discuss this need with your hospice care team; we can provide the appropriate walking aid.
- ♥ Support your loved one as he or she stands, to assist in maintaining balance. Your hospice team can demonstrate the most effective techniques for you.
- ♥ It is helpful to move any furniture that may obstruct the walking space. You'll need to make enough space for you to walk alongside your loved one.

- ♥ Practice some “preventive housekeeping.” Keep the floor dry and clear of clutter. Avoid having throw rugs, cords or other potentially hazardous obstacles in the area.
- ♥ When “transferring” your loved one from bed to chair or from chair to bed, place the bed in the lowest position. Allow ample time for moving from one place to another.
- ♥ Shoes and socks will provide safety and may prevent slips and falls. However, do not use socks without shoes, as they can be slippery on floors. Booties with tread provide comfort and safety.

We can provide equipment to assist your loved one with walking or moving from bed to chair. We are just a phone call away at 888.441.4040.



Preventing Falls and What to Do if One Occurs

Your loved one is at risk of falling as he or she becomes weak, unsteady or confused. Falls can also be caused by slipping on spills, waxed or tiled floors, throw rugs, improper shoes and wearing socks on floors. Your hospice nurse can evaluate the safety of your home and make recommendations for removing safety hazards.

Some Precautions to Take:

- ♥ Rearrange furniture, making it safer for your loved one to walk around the home.
- ♥ Encourage the use of any assistive devices you have obtained, such as a cane or walker.
- ♥ If your loved one is standing and starts to fall, help him or her gently to the floor. Doing this lets you break the fall without hurting your loved one or yourself.
- ♥ If your loved one falls before you are able to help him or her to the floor, look at the person's arms, legs and head for any area that may be injured. Ask whether the loved one is hurt. ***Call Care Connection at 888.441.4040 if your loved one has fallen, even if the person doesn't appear to be hurt.***
- ♥ If your loved one is unable to get up with your help, make him or her comfortable on the floor. You can use a pillow or blanket. Move any objects or cords away from the area.

“A hero is an ordinary individual who finds strength to persevere and endure in spite of overwhelming obstacles.”

– Christopher Reeve



Bathing and Personal Hygiene

Personal hygiene is important in maintaining your loved one's dignity and comfort. As a caregiver, you need to think about several areas: bathing, hair and skin. Your hospice team can show you how to follow the procedures described on pages 16 to 21. Please don't hesitate to ask questions.

As long as your loved one is strong enough, he or she should bathe or shower as usual. However, there may come a time when the person feels too weak and unsteady to do this safely. There is equipment, such as a shower chair, designed to enable a person to sit in the shower or bathtub while bathing.

Your hospice team will be happy to make arrangements for delivery of a shower chair, or you can call us at 888.441.4040.

Bed Bath

The soothing comforts of bathing and feeling clean are especially important for your loved one at this time. Feeling clean promotes a sense of well-being. If your loved one is physically limited or confined to bed, he or she will need and appreciate a bed bath. Your hospice certified nursing assistant may be scheduled to bathe your loved one, and can also show you how to give a bed bath.

Important Tips:

- ♥ Allow your loved one to determine the best time for bathing.
- ♥ Make the person as comfortable as possible before you begin bathing.
- ♥ Waiting one hour after taking pain medications may lessen the discomfort of moving.
- ♥ Provide privacy by closing doors.
- ♥ Keep your loved one covered with a light blanket or sheet.
- ♥ Reduce the strain on your back by raising the bed so it is even with your waist.

- ♥ Raise the side rail on the side opposite of where you are working.
- ♥ Take caution not to remove or loosen medication patches.
- ♥ Change the water when it becomes soapy, cold or dirty.

Bed-Bath Procedure

Your hospice certified nursing assistant may be scheduled to bathe your loved one and demonstrate how you can give a bed bath.

Gather the following equipment:

- ♥ Large bowl or bath basin with warm water
- ♥ Mild soap
- ♥ Two to three towels and washcloths
- ♥ Lotion and other toilet articles as requested
- ♥ Clean clothing
- ♥ Light bath blanket or sheet

1. Ensure privacy by closing doors and curtains. Cover your loved one with the light blanket or sheet.
2. Start on one side of the body. Keep a towel under the area being washed, and wash from the face down toward the feet. Keep an extra towel nearby for spills.
3. If possible, soak your loved one's hands or feet in water for a few minutes, which is soothing.
4. Gently wash, rinse and dry each area.
5. Remember to wash your loved one's back, and to gently apply lotion.
6. Wash the genital or private area last. Begin in the front and wipe to the back. Rinse well and gently pat dry.
7. If the bedding is damp or wet following the bath, it will need to be changed for your loved one's comfort (see "Making an Occupied Bed" on page 24).
8. Change the water when it becomes soapy, cold or dirty.

Hair Washing in Bed

Your loved one may be affected by how his or her hair looks and smells even when the person does not feel well. You can assist in shampooing. Again, your loved one's personal preference and safety should always be considered.

Hair-Washing Procedure

Gather the following equipment:

- ♥ A rubber or plastic bed-protecting trough. (You may make your own by rolling up three sides of a flat bedsheet to form a trough. Leave one side open. Your hospice care team can show you how to do this.)
- ♥ An underpad. This is placed over the rolled bedsheet with the plastic side facing up. (The side of the sheet should be left open so that it drains into a bucket, tub or basin.)
- ♥ Two bath towels
- ♥ Mild shampoo
- ♥ Pitcher or large plastic cup for pouring water
- ♥ Basin, tub or pail
- ♥ Comb and brush
- ♥ Hair dryer

1. If possible, position your loved one with head and shoulders as close as possible to the top edge of the bed.
2. Line the top of the bed with an underpad.
3. Place the trough under your loved one's head.
4. Place the basin or bucket on a chair below the trough drain. Test the trough with a small amount of water to make sure the basin will catch the water.
5. Fill the water pitcher or large plastic cup with warm (not hot) water, and completely wet the hair.
6. Apply a small amount of shampoo and lather with both hands. Rub very gently and then rinse thoroughly. You may need to rinse three to five times to remove all the shampoo.
7. Apply conditioner if desired and rinse lightly.
8. Gently wrap your loved one's head with a bath towel and pat the hair dry.
9. Gently comb the hair to remove any tangles and blow dry from a safe distance if the person can tolerate the noise and heat of the dryer.
10. If the bedding is damp or wet following the hair wash, it will need to be changed for your loved one's comfort (see "Making an Occupied Bed" on page 24).

“ To know even one life has breathed
easier because you have lived—that is
to have succeeded. ”

– Ralph Waldo Emerson



Mouth Care

Oral hygiene (keeping the mouth and teeth clean) is essential for comfort. Mouth care should be provided at least twice a day; it can help prevent mouth sores and may improve your loved one's appetite. If your loved one can no longer sit up to brush his or her teeth, we can provide "toothettes" or other supplies in place of a toothbrush for your use. You can also use a soft, damp washcloth to provide mouth care. Any type of lip balm can be used to prevent chapped lips. If your loved one is well enough, you can perform the following procedure:

Mouth-Cleaning Procedure

Gather the following equipment:

- ♥ Toothbrush
- ♥ Toothpaste
- ♥ Small bowl or basin
- ♥ Washcloth
- ♥ Towel
- ♥ Water
- ♥ Mouthwash

1. Raise the head of the bed to prevent choking.
2. Place a towel over your loved one's chest.
3. Brush the teeth gently.
4. Allow your loved one to rinse with water and spit into the basin.
5. Use mouthwash as desired by your loved one. You may need to dilute the mouthwash since most mouthwashes have alcohol and may burn a sensitive mouth.
6. If your loved one has dentures, you should:
 - ♥ Remove and clean dentures after eating.
 - ♥ Clean the mouth with a soft cloth and rinse.

Be sure to call us at 888.441.4040 if your loved one is having difficulty swallowing or chokes excessively while you are providing mouth care.

Skin Care

It is especially important to provide good skin care when your loved one is confined to bed or has difficulty moving. In addition to maintaining cleanliness, you will want to prevent skin breakdown and sores, which often occur when a person is nutritionally compromised or experiences restricted movement for an extended period. The first sign may be a reddened area on the skin. This usually begins in areas where the bones are close to the skin. Some areas to watch for redness are the back (spine and shoulder blades), buttocks, elbows, and heels of each foot. Good skin care can also help increase circulation.

Important Tips:

- ♥ Wash the skin with a mild soap and gently pat the skin dry.
- ♥ Apply lotion to gently moisturize the skin. You should use an unscented or very lightly scented lotion.
- ♥ Keep bed linens dry and free from wrinkles. Even small wrinkles can be intensely troublesome for someone in bed for long periods.
- ♥ Change the position of your loved one every two hours.
- ♥ Use pillows to support the legs, back and shoulders.
- ♥ Administer pain medication as directed to promote comfort during bathing.

Call us at 888.441.4040 if your loved one develops diarrhea, which may be irritating to the skin. If dressings are soiled and you are unable to change them, please let your hospice nurse know that you need help in meeting this need.

Body Mechanics/Positioning

While you are caring for your loved one, it is vital to protect your health and personal safety. Using good body mechanics and positioning will help protect you from injury. Properly positioning your body is important when helping your loved one with bathing, getting out of bed, walking, and turning or moving from bed to the chair.

Important Tips:

- ♥ When lifting your loved one, use the longest and strongest muscles in your body: your shoulders, upper arms, thighs, and hips. **Do not use your back for leverage!**
- ♥ Face your loved one as closely as possible, and—keeping your back straight—bend your knees and hips. **Use your thigh muscles, not your back.**
- ♥ Make sure your feet are about shoulder-width apart and flat on the floor. This position will give you a wide base of support.
- ♥ You can also work at waist level whenever possible, so that you do not have to bend.
- ♥ Avoid twisting your body when working.

Call us at 888.441.4040 if you have problems lifting or moving your loved one. We can show you the proper body mechanics in detail and answer your questions to help resolve any concerns.



Lifting, Turning, and Repositioning in Bed

At some point, your loved one may become weaker and need more help to move in bed and change position. You should reposition him or her frequently for comfort. Be sure to use proper body mechanics and positioning as described on page 22.

Important Tips:

- ♥ Always be sure the side rails are up when turning the person in bed.
- ♥ Use wheelchair locks when moving your loved one in or out of the wheelchair.
- ♥ Raise the bed to the level of your waist. Stand close to your loved one. Keep your back straight and flex your knees. Let your legs do the work!
- ♥ Keep your feet about shoulder-width apart to provide a firm base of support to lift or assist the person in changing position.

Making an Occupied Bed

If your loved one can no longer get out of bed, you will be able to change the bedsheets while the person remains in bed using the technique described below. Your hospice nurse or certified nursing assistant will also show you how to do this. Whenever the bed becomes soiled, clean sheets are needed to prevent the breakdown of skin, enhance your loved one's self-esteem and keep the person feeling his or her best. If you do not have a hospital bed, speak to your hospice nurse. A hospital bed may make this task easier for you.

Bedmaking Procedure:

1. Loosen the sheets all around the bed.
2. Roll the bottom sheets toward your loved one. Tuck the rolled sheets under his or her body if possible. If you are unable to tuck the sheet under your loved one, roll the sheet as close as you can.
3. Place the clean sheets on the bed and finish changing the side of the bed closest to you by tucking the sheets under the mattress.
4. You may want to fold a flat sheet in half to use as a draw sheet. A draw sheet can be used to help you with turning and moving your loved one.
5. Roll the sheets toward the middle of the bed and tuck them under the old or dirty sheet that has been tucked under your loved one's body.
6. Roll your loved one away from you over the rolled-up bedsheets/linens to the clean side of the bed.
7. Pull the dirty sheets off the bed.
8. Pull the clean sheets toward you.
9. Finish making the bed by tucking in the clean bedsheets. Ensure that the sheets are as wrinkle-free as possible.

Your hospice nurse or certified nursing assistant will be happy to demonstrate the procedure, including how to make a draw sheet.

Using the Bathroom

There may be a time when your loved one can no longer walk to the bathroom. A bedside commode (toilet) may be necessary and can be provided. Please make the request if needed. Your loved one may eventually need to use a bedpan or urinal if he or she is unable to get out of bed. Your hospice nurse or certified nursing assistant will teach you how to safely help your loved one with the commode or bedpan.

Important Tips:

- ♥ Your loved one may be prone to constipation because of medications and lack of activity. If a stool softener is ordered by your loved one's doctor, please make sure your loved one takes the medication as directed.
- ♥ Be aware that your loved one should have a bowel movement at least every three days, even if he or she is eating less food.
- ♥ The need to urinate may be as frequent as every two to three hours.
- ♥ Frequent checking of your loved one's elimination is important. Feel free to discuss this need with your hospice care team or call us at 888.441.4040 if you have concerns about it.
- ♥ Using the bathroom is a very personal matter. Always try to ensure and respect your loved one's privacy.
- ♥ There may be a time when your loved one no longer has control of his or her bladder and/or bowel movements. Waterproof bed protectors may be used to keep the bed dry. Your hospice team can provide these for you.
- ♥ Quickly removing any wet or soiled linens is essential for comfort and must be done to prevent sores, rashes and infection.

Call us at 888.441.4040 if any of the following occurs: your loved one has not urinated in the last 12 hours; your loved one has not had a bowel movement in 3 days; there is blood in the stool or urine.

Food and Water/Nutrition

Providing someone who is ill with good nutrition can be difficult. Your loved one may feel nauseated, have difficulty swallowing, or may not feel hungry. Understand that loss of appetite is normal and may increase as the disease progresses.

Important Tips:

- ♥ Determine and respect your loved one's preferences for food and fluids. You should *never* force your loved one to eat or drink.
- ♥ Try to provide a variety of food in small portions. Small amounts offered every few hours may be more appetizing.
- ♥ Offer mouth care before and after meals. (See "Mouth Care" on page 20).
- ♥ If your loved one is eating meals in bed, be sure to raise the head of the bed.
- ♥ Always maintain the correct schedule of pain medications to reduce discomfort at mealtimes.



Oxygen Therapy

Your loved one may require oxygen supplements for comfort. Your hospice doctor will determine the amount of oxygen that is appropriate. We will provide the necessary equipment and oxygen supply. Your hospice nurse will teach you how to use them.

Warning: Oxygen can be dangerous if it is not used properly. Your hospice nurse will review the safety procedures and guidelines with you. “No smoking” signs will be provided for display.

Important Tips:

- ♥ Everyone must obey the restriction of **NO SMOKING** when oxygen is in the home. Even if the oxygen is turned off, this safety rule must still be followed.
- ♥ Oxygen is considered a medication. The amount or rate of oxygen must not be increased or decreased without an order from the doctor. **Call us at 888.441.4040 if you have any questions or concerns about the amount of oxygen being given.**
- ♥ Check the skin under the tubing around your loved one's ears to make sure there is no redness or irritation to the side of the ear or head.
- ♥ Adjust the face mask or tubing so it fits appropriately.
- ♥ Check the nasal cannulas (the tubes that go into the nose) to be sure they are not irritating the nose.
- ♥ Oxygen has a drying effect, so remember to provide mouth care frequently.
- ♥ If a humidifying bottle is attached to the oxygen, be sure it has fluid in it and does not run dry.
- ♥ The air filters on the oxygen concentrator may need to be cleaned at regular intervals. Your hospice nurse or certified nursing assistant will show you how to do this and indicate how often to clean them.

Call us at 888.441.4040 if you have any questions or concerns about administering the oxygen. Also, call if the oxygen system does not appear to be working properly.

Range-of-Motion Movements

Exercises that promote comfort and prevent complications from lack of mobility or movement are essential in the care of your loved one. These “range of motion” movements involve supporting and moving each limb at the joint. If your loved one is able to do so, he or she may exercise independently. If he or she is too weak, you can move your loved one’s body to help the person perform the range-of-motion movements. Your hospice nurse or certified nursing assistant can demonstrate these range-of-motion exercises.

Important Tips:

- ♥ Make sure that your loved one’s pain medications have been given as directed before performing the exercises.
- ♥ Watch your loved one’s facial expressions when providing range of motion.
- ♥ Support the limb at the joint while you are moving the limbs in the motion of the exercise.
- ♥ Repeat the exercise three times for each joint, moving each limb slowly, gently and smoothly. Avoid sudden forceful movements.



Helping an Unconscious Loved One

When your loved one no longer responds to his or her surroundings, he or she may drift into unconsciousness. This is normal and usually progresses over a period of time. This stage can last for weeks, or it may occur suddenly as the person nears death.

Important Tips:

- ♥ Even though it may appear otherwise, your loved one can hear you and feel your touch.
- ♥ Do not try to feed your loved one. He or she may be unable to swallow, which is normal at this point. *It may help to remember that none of us normally eats or drinks while we are sleeping.*
- ♥ You may place a few ice chips in the side of the mouth to keep the mouth moist.
- ♥ Provide mouth care frequently (see “Mouth Care” on page 20).
- ♥ If your loved one is unconscious, he or she will not have control of his or her bowels or bladder. Try to keep the person clean and comfortable.
- ♥ As you speak with your loved one, explain what you are doing. You can tell the person what day and time it is and what you are going to do.
- ♥ Maintain good skin care. It is helpful to massage the body with lotion. Observe the condition of the skin and whether there are reddened areas.
- ♥ Gently turn your loved one every two hours. Pillows or rolled blankets may be used as props or support behind your loved one’s back or between the legs or arms.
- ♥ Observe your loved one’s facial expressions while moving or turning him or her. Call us at 888.441.4040 if the person appears to be uncomfortable.

Call us at 888.441.4040 if unconsciousness should occur suddenly or if you need additional training and support to provide care during this time.

At Trustbridge, we're here with a simple promise: to provide comfort for our patients, families and those with the responsibility of caring for them every day.

It is our privilege to support you in this caregiving journey.

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Direct inquiries to Senior Director of Marketing at 561.848.5200

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