**Tips for compassionate communication** with deteriorating PATIENTS

- Ground yourself – slow down and remember to breathe.
  - Acknowledge that this is a stressful situation.
  - Prepare and be clear on what you want to say.

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**With the patient**

**Avoid sentences such as**

- Don’t tell people how they feel or what they are experiencing
- Don’t promise anything you might not be able to deliver
- Avoid clichés
- Avoid unsolicited advice
- Don’t compare to your own experience or that of another patient

**“There is nothing more we can do for you.”**

**“Don’t worry, you’ll die quietly and peacefully with these drugs.”**

**“These drugs will let you die without suffering.”**

**“You must be strong for your family.”**

**“We will make sure that you don’t suffer.”**

**“You won’t be alone”**

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**With the patient**

**RECOMMENDED expressions**

- Listen, use silence
- Acknowledge feelings, resist the urge to fix
- Try to provide information in chunks and leave time for the person to respond
- Use your own words; be genuine

**“Hello, (address the person by name), I am... (introduce yourself by Name, Occupation, Duty)**

**“It sounds like you are feeling anxious/ afraid / sad. (name emotion) Did I get this right?” This is very understandable**

**“The healthcare team will continue to use all available medical treatments that we think will help you”**

**“I am so sorry that your family cannot be here in person with you-- that must be so difficult.”**

**“Although your family cannot visit in person we can arrange for phone calls / Face time so you can talk, see them. Would you like us to set that up? If so with who and how often?”**
Tips for compassionate communication with FAMILY of deteriorating patients

- Ground yourself – slow down and remember to breathe.
- Acknowledge that this is a stressful situation.
- Prepare and be clear on what you want to say.

When on the phone to the family

- Don’t promise anything you might not be able to deliver
- Avoid clichés

Avoid sentences such as

DO NOT introduce yourself in an impersonal way:
“Hi, I’m the doctor on duty.”

Never refer impersonally to the patient:
“A patient in this stage of COVID-19…”

DO NOT say:

“There is nothing more we can do for your father/mother/etc.”

“We are withdrawing care.”

“Don’t worry, your father/mother/etc. will die peacefully with these drugs.”

“These drugs will let him or her die without suffering.”

When on the phone to the family

- Make the phone call from a location with minimal or no distractions
- Try to provide information in chunks and leave time for the person to respond
- Acknowledge feelings, resist the urge to fix
- Use your own words; be genuine

RECOMMENDED expressions

“Hello, (address the person by name), I am... (introduce yourself by Name, Occupation, Duty)

“I’m so sorry that we cannot meet in person to talk about [name of patient].”

“I would like to give you an update and share some of my concerns with you.”

“I’m sorry to have to tell you this. His/her condition is deteriorating... I am so sorry”.

“I want you to know that we will continue to use all available medical treatments that we think will help your family member”

“I want to continue to keep you updated. I would like to call you again (give approximate timeframe)—is that ok?”

“I wish things were different. This is an extraordinary time we all find ourselves in.”

“I can’t imagine how difficult this is for you and everyone else who loves (patient’s name).”