Comfort Care During Removal of a Breathing Machine

Change in the focus of care

- Deciding that the best thing to do for a loved one is to remove the breathing machine is difficult. Sometimes removing other treatments before removing the breathing machine allows the patient to die naturally, before the breathing machine needs to be removed. The doctors may suggest stopping the heart and oxygen monitors, blood tests, and IV medicines, except for comfort medicines. Stopping these things does not mean the patient is getting less care. It simply means that since the goal of care is now comfort, these intensive care treatments that may cause discomfort, are no longer needed.

- Since there are several ways to remove a breathing machine, ask questions if you do not understand how this will be done for your loved one. An alertness attempt may be tried with your loved one that may give you an opportunity to interact with him or her. If the patient becomes uncomfortable during the alertness attempt, the doctors and nurses will stop the attempt and give more comfort medicines. Comfort measures will be a part of the process of removing the breathing tube.
Family matters

• You may want to contact family and friends who might want to say "Good-bye" to the patient. Discuss with the doctors the time frame when the breathing machine will be removed. Those who have not already done so may wish a chance to visit. The patient will be heavily sedated before the breathing machine is removed to provide comfort.

• Remember that hearing is the last sense to “go”. People who have been in comas have said they were able to hear. Talk and share your feelings with your loved one even though he or she may not show any visible signs of response.

• If it would help you or your loved one, ask for a chaplain to provide support, prayers and/or other religious traditions. Your personal chaplain is welcome at any time.

• Ask for privacy with the patient if you want it. Ask for more chairs to sit at the bedside if you need them. Ask the nurse to free your loved one’s hands so you can hold them.

• Sometimes patients have trouble “letting go”. You may need to reassure the patient that he or she is loved and will be missed, but that you will be OK. Give your loved one permission to go.

Some suggestions to provide a soothing atmosphere:

• Play your loved one’s favorite music.

• Place scented potpourri near the pillow.

• Gently massage the patient's arms, legs and/or feet with a scented body lotion.

• Read from the Bible, Koran, or other book that has been inspirational to the patient.

• Encourage everyone at the bedside to share his or her favorite memories of the patient. Include the funny stories, too. It is not disrespectful to laugh when a person is dying if that reflects the spirit of who they were.
Removing the breathing machine

- Think about whether or not you want to be present in the room when the breathing machine is removed. Let the health care team know your wishes. Ask them what to expect. This may help you decide if you want to be at the bedside or not. You will always be able to see your loved one after he or she has died if you wish.

- Even before the breathing machine is removed, you may notice that many of the other machines have been turned off or taken out of the room. Without machines to distract them, it is easier for staff and family members to focus on the patient – instead of the machines. Another reason to remove the extra machines is provide more space and to decrease the noise in the room. This may be helpful if the chaplain is saying prayers. A sense of peace and quiet in the room is often very comforting. It gives those present the chance to share fond memories of the patient.

- Remember that sometimes patients who are very sick may move their arms and legs when they do not know what they are doing. These movements are reflex responses and do not mean that the patient is getting better. Patients may also breathe “funny”. This is expected and it does not mean they are suffering.

- The doctors and the nurses may give you estimates of how long the patient will live once the breathing machine is removed. Remember these are estimates. Such matters have no firm predictions.

Talk to your doctor or others on your health care team if you have questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.