

Part 1 Preview & Background

⇒ **What is more important at the end of life—comfort, or trying every possible treatment?**

- This is an emergency room in a hospital in Pittsburgh.
- Helen and Jeremy are the adult children of Mr. Spencer.
- Mr. Spencer has Alzheimer's as well as pneumonia that has progressed to sepsis.
- Mr. Spencer may need life support (a breathing machine).
- He has a written record stating that he does not want to be kept alive artificially.



Dr. Robby

Helen

Jeremy

Mr. Spencer

⇒ While you are watching, think about: **What decision do you think Dr. Robby wants the family to make?**

Part 2 Comprehension *Answer the questions while or after you watch the video.*

True / False

1. **T / F** Mr. Spencer is having trouble answering simple orientation questions.
2. **T / F** Removing the extra fluid would cause Mr. Spencer's blood pressure to spike (increase).
3. **T / F** Mr. Spencer wrote down that he does not want to be intubated.
4. **T / F** Dr. Robby recommends intubating.
5. **T / F** Dr. Robby believes Mr. Spencer may die soon.

Comprehension Questions

1. What are Mr. Spencer's symptoms?
2. What does Helen want to do?
3. What problems does Dr. Robby mention about intubation?

Part 3 Language Review Choose the word or expression from the video that best matches the highlighted expressions.

1. His lungs are filling up with [**liquid**].
2. Not without his blood pressure [**falling**] with very bad consequences.
3. Well, we know he expressed his wishes in writing. Do not [**insert a breathing tube**].
4. He might need to be [**made sleepy with drugs**].
5. He might need to be [**held down, tied**] because he'd be in an unfamiliar place with a very uncomfortable tube down his [**windpipe**].
6. [**Old, Senior**] patients can often develop [**loss of reality, severe confusion**].

Part 4 Discussion

1. Helen and Jeremy respond differently in this situation. Whose reaction feels more emotional? Whose reaction feels more logical?
2. How would you react in a similar situation with a family member?
3. Should doctors give clear opinions in situations like this, or should they stay neutral? Why?
4. If someone has written medical wishes in advance (an advance directive), should the family always follow them?
5. How do you feel about quality-of-life vs length of life? What is more important in a situation like this?

For medical professionals:

6. How effectively does Dr. Robby deal with this situation?
7. What specific language does he use to avoid giving a direct recommendation? (Underline the language in the script – i.e. “might”, “would”, “often”.)
8. How do you usually respond when someone asks, “What would you do?”
9. If you were the doctor in this situation, would you give any clear advice? If so, what would it be?
10. Mr. Spencer has a written DNR/DNI directive. In your country or system, what are the legal or medical requirements in a situation like this?

Part 5 Dialogue Practice: First, try to fill in the missing language from memory. Check the script for the expressions you cannot remember. Then, practice reading the dialogue with a partner. It has been altered slightly for two people.

Doctor: BiPAP, 15 _____ 5. Let's step out.

Patient Proxy: What's BiPAP?

Doctor: It is a pressurized air mask that can improve his oxygen. Either his pneumonia is _____ or his heart couldn't handle the fluids that we gave him to treat the sepsis. His lungs are _____ with fluid.

Patient Proxy: Can't you take the fluid away?

Doctor: Not without his blood pressure _____ with very bad consequences. So, let's just hope the BiPAP works.

Patient Proxy: And if it doesn't?

Doctor: Then I would need to know your decision about _____ a breathing machine.

Patient Proxy: I'm still thinking about it.

Doctor: Well, we know he _____ his wishes in writing. Do not intubate.

Patient Proxy: I am thinking we could try it for a week.

Doctor: That would be a very painful week. He wouldn't get a lot of rest with all the monitors and all the blood tests. He might need _____ sedated. He might need _____ restrained because he'd be in an unfamiliar place with a very uncomfortable tube _____ his throat.

Doctor: And he wouldn't really know what was happening. Elderly patients can often _____ psychosis.

Patient Proxy: But he might get better, or he might get worse. What would you do?

Doctor: I really can't answer that for you. This is your father. That's your decision to make. I can guarantee you that we will keep him as comfortable as possible if a natural death is what you choose.

Patient Proxy: But he's not your father, and he can recover from this. That is why I am still deciding the best thing _____.

Doctor: Well, the sooner you decide, the better. I'm really sorry. I wish there was more that I could do. I'm not sure that he has that much _____.

Script

- Helen:** What is happening?
- Dr. Robby:** Uh, his oxygen levels are dropping. Mr. Spencer, how are you feeling?
- Mr. Spencer:** I don't remember where I parked.
- Dr. Robby:** Mr. Spencer, do you know where you are?
- Mr. Spencer:** It's so loud in here.
- Helen:** Dad, do you know where you are?
- Jeremy:** Dad, look at me. What's my name?
- Mr. Spencer:** I don't know where my car is.
- Dr. Robby:** BiPAP, 15 over 5. Let's step out.
- Helen:** What's BiPAP?
- Dr. Robby:** It is a pressurized air mask that can improve his oxygen. Either his pneumonia is getting worse or his heart couldn't handle the fluids that we gave him to treat the sepsis. His lungs are filling up with fluid.
- Helen:** Can't you take the fluid away?
- Dr. Robby:** Not without his blood pressure crashing with very bad consequences. So, let's just hope the BiPAP works.
- Helen:** And if it doesn't?
- Dr. Robby:** Then I would need to know your decision about using a breathing machine.
- Helen:** We're still talking about it.
- Dr. Robby:** Well, we know he expressed his wishes in writing. Do not intubate.
- Helen:** We're thinking try it for a week.
- Dr. Robby:** That would be a very painful week. He wouldn't get a lot of rest with all the monitors and all the blood tests. He might need to be sedated. He might need to be restrained because he'd be in an unfamiliar place with a very uncomfortable tube down his throat. And he wouldn't really know what was happening. Elderly patients can often develop psychosis.
- Helen:** But he might get better.
- Jeremy:** Or he might get worse. What would you do?
- Dr. Robby:** I really can't answer that for you. This is your father. That's your decision to make. I can guarantee you that we will keep him as comfortable as possible if a natural death is what you choose.
- Helen:** But he's not your father, and he can recover from this.
- Jeremy:** What my sister means is that we're still deciding the best thing to do.
- Dr. Robby:** Well, the sooner you decide, the better. I'm really sorry. I wish there was more that I could do. I'm not sure that he has that much time left.