

FIGHT FOR ANY CHANCE TO LIVE, SUFFER NO MORE IF LIFE GOING TO END

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Working in the Emergency Room (ER) for over eight years, I have many unspeakable feelings as the ER door opens and closes. ER staff work hard to save lives. There is a sense of accomplishment when we can save a life as a team.

Accurate ER Saves Precious Lives

I remembered that a woman came to the ER due to respiratory asthma. Since she was having difficult time breathing and the blood oxygen was low, the doctor ordered emergency intubation. As we were inserting the tube, the patient's heart suddenly stopped beating. The emergency procedures were activated. After the doctor evaluated the medical history and discussed the condition with the family, he thought there was still a big chance (for the patient to survive). He quickly diagnosed pulmonary embolism and decided the patient met the condition for installing Hayek film. The cardiac surgical team was formed. After the emergency operation and ICU care, the patient



recovered and discharged from the hospital. The team not only was encouraged by this case but felt the preciousness of this job.

Promoting Emergency Palliative Care – Recommending Letting Go

However, there were times when we were not able to save a life. As the result, not only did the patient suffer, the family also received little comfort. Therefore, I often struggle for this kind of feelings. Sometimes I want to take the initiative to talk with doctors and family members but lack the courage.

As the concept of palliative care is being promoted, many doctors in the ER would take the initiative to mention to the family about palliative care when they determine that the emergency aid can no longer save the patient. Most family members would agree but some would not give up, which we had to proceed

with useless emergency treatment. As the result, after 30 minutes of emergency treatment, the patient's chest collapsed and caved in, the lung was filled with blood. When cleansing the body, we told the deceased in our heart, "You've tried and suffered. God bless you." However, we could not help but feel sad for them.

Don't Make the Loved Ones Suffer - Let Them Leave Peacefully

Now that I am a mother, I am more sensitive when saving little ones. I remember the day our ER received a call for hospital transfer. A three-month old baby girl had been under emergency treatment in other hospital for 30 minutes. Since the family refused to give up and decided to transfer the patient to our hospital, without having full details, the emergency vehicle had already arrived at the door. The doctor explained the child's situation and suggested to give up emergency treatment so the baby could leave peacefully. The family insisted on emergency treatment to save the child. I was inside the ER station at the time. I asked the social worker to help consulting the family, telling them: "The child is truly gone. Can we love the child one more time?" Gradually, the family accepted the suggestion.

We led the family to wipe the baby's body, put on the diaper, change to clean clothes, and wrap the baby in the blanket as they used to do. The baby looked like she was sleeping inside her mother's arms. We also guided the family members to express their love for the child. Listening to parents telling the child that they loved her very much and wished the child to come back to be their child again, it brought tears to my eyes. I was also glad that the family members were willing to do this with us. I think not only the child would peacefully become a Bodhisattva; the soul of the family can be at ease.

Patients who come to ER usually are time sensitive because of life impermanence. Sometimes, it is difficult to introduce palliative care, if necessary. However, whenever emergency treatments no longer work, doctors have to be compassionate and sincere when approaching family, and nursing staffs need empathy toward family's emotion, guiding them to express their feelings: "Gratitude, Sorrow, Love, and Farewell." Help the family to retain the most beautiful memories is one great way to care for all. I believe patients and family members would then be at ease. I hope that we can continue this idea and practice to help patients in similar situations.