
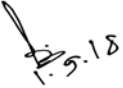
 Govt. of Meghalaya	<p align="center">PRIMARY HEALTH CENTER NARTIANG WEST JAINTIA HILLS 793151 MEGHALAYA</p>	Doc. No. NPHC/ELCP/12
		Date issue: 01-09-2018
		Issue No:01
<i>Prepared by:</i> Dr(Ms) S.Surong(MO)  Signature & Date		Revision No:00
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END OF LIFE CARE POLICY

1. POLICY:

In the last phase of life people seek peace and dignity. The hospital shall provide the following elements of care from physicians, health care institutions, and the community.

2. PURPOSE:

- To provide skilful nursing, gentle handling and utmost reverence to the body after death.
- To fulfill Patients cultural beliefs or personal wishes relating to death and dying. These must be respected.
- To ensure Infection risks do not increase after death. Death in hospital may necessitate by law the involvement of the registrar/legal authority.
- To ensure that healthcare workers comply with legislation, the wishes of patients/relatives and continue to follow Standard Precautions and where necessary.
- To minimize Transmission Based Precautions and any risk of cross-infection.

3. SCOPE:

All Death Patients at Area hospital-Nartiang PHC

4. RESPONSIBILITY:

Nurse/Housekeeping staff

5. DISTRIBUTION:

All Inpatient Areas

6. PROCESS DETAILS:

6.1 DESCRIPTION OF THE PROCESS:

Core Principles for End-of-Life Care

Clinical policy of care at the end of life and the professional practice it guides should:

1. Respect the dignity of both patient and care givers.
2. Be sensitive to and respectful of the patient's and family's wishes.
3. Use the most appropriate measures that are consistent with patient choices
4. Encompass alleviation of pain and other physical symptoms.
5. Assess and manage psychological, social, and spiritual/religious problems.
6. Offer continuity (the patient should be able to continue to be cared for, if so desired, by his/her primary care providers).
7. Provide access to any therapy which may realistically be expected to improve the patient's quality of life, including alternative or non-traditional treatments.
8. Provide access to palliative care and hospice care.
9. Respect the right to refuse treatment.
10. Respect the physician's professional responsibility to discontinue some treatments when appropriate, with consideration for both patient and family preferences.
11. Promote clinical and evidence-based research on providing care at the end of life.

Identify the following:

- If the patient has any cultural or religious beliefs which necessitate alternative procedures. If this is the case then follow the instructions for the specific religion guidelines.
- If the body of the deceased is likely to leak after death, a body bag will be required.
- If any special requests made before death, e.g. the keeping on of jewellery, clothes to be worn.

- If the eyes have been donated for corneal grafting.
- If there are any radiation precautions still in force.

PROCEDURAL STEPS:

Condition of the dead body is to be verified and recorded properly.

6.2 ACTIVITY AND RESPONSIBILITY:

Sr. No	Activity	Responsibility
	PHYSICAL PREPARATION OF DEAD BODY	
1.	Eyes should be closed immediately as in sleep. If relatives have consented to	Staff Nurse on duty/Gr-IV
2.	Body to be straightened with arms laid at the sides.	Staff Nurse on duty/Gr-IV
3.	Mouth should be closed immediately.	Staff Nurse on duty/Gr-IV
4.	Remove all support equipments	Staff Nurse on duty/Gr-IV
5.	Give thorough sponging to the patient.	Staff Nurse on duty/Gr-IV
6.	To change patient clothes.	Staff Nurse on duty/Gr-IV
7.	Keep the head & chin in position.	Staff Nurse on duty/Gr-IV
8.	Bandages may be used if necessary.	Staff Nurse on duty/Gr-IV
9.	Plug nose and ears with cotton plug.	Staff Nurse on duty/Gr-IV
10.	Cover the patient with new white bed sheet.	Staff Nurse on duty/Gr-IV
11.	Allow the relatives to be with the body for a while. Arrange to meet the religious rites if possible.	Staff Nurse on duty/Gr-IV
12.	Staff Nurse on duty to follow the routine discharge procedure as per Discharge policy.	Staff Nurse on duty/Gr-IV
13.	If the deceased has dentures ensure they are in right place.	Staff Nurse on duty/Gr-IV
14.	Attach identification bands to a wrist and the opposite ankle of the deceased.	Staff Nurse on duty/Gr-IV
15.	Both identification bands should contain the following information: Deceased's Name, Hospital Number, date of birth, ward.	Staff Nurse on duty/Gr-IV
16.	If the lower jaw drops down significantly, consider	Staff Nurse on duty/Gr-IV

	putting on a chin support by applying bandages.	
17.	Place an adult incontinence pad/diaper under the deceased.	Staff Nurse on duty/Gr-IV
18.	If the deceased is to be viewed by relatives on the ward ensure there is no blood or body Wrap the patient carefully in a sheet and fasten with tape. Fluid leakage about the face.	Staff Nurse on duty/Gr-IV
19.	Close all the orifices of the body with cotton plug.	Staff Nurse on duty/Gr-IV
20.	Place the deceased in a body bag if the body is likely to leak, or if the patient has an infection / alert organism and it is indicated in table 1.	Staff Nurse on duty/Gr-IV
21.	Remove gloves and plastic apron and wash hands. (Use new gloves for any additional clearing procedures to prevent direct contact with blood or body fluids or equipment contaminated with blood or body fluid).	Staff Nurse on duty/Gr-IV



1.5.18