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## Talking with Dying Patients

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**Many people worry about how to talk with someone who is dying. Remember that your caring presence is more important than “saying the right thing” and listening may be more comforting to a patient than trying to make conversation.**

### **What you can do to provide emotional support**

- Know your patient’s history, if death is expected to be soon, and be aware of his/her preferences for care at end-of-life.
- Let the patient know that care is focused on his/her wishes and that the team will do their best to honor these wishes.
- Listening is an important part of communication and requires your full attention. It is important to give the patient time to share his/her story in his/her own words. Helping the patient review his/her life’s story may help resolve past conflicts, and foster forgiveness and inner peace.
- Encourage the patient and family to express their feelings. Be prepared for a range of emotions such as anger, sadness, anxiety, or fear. Try not to be angry, judgmental, or be offended by what is said.
- Be honest. If the patient asks if he/she is dying, ask “What do you think/feel?” According to how they respond, let the patient know what is happening. An example of a way to say this is, “It appears that your body is changing, (state some of the signs and symptoms you are seeing) and that you are getting weaker.” You may add, “Is there anything that you need to do, or anyone you need to see at this time? The team is here to help you with whatever you need.” It is also important to ask about spiritual needs at this time. An example may be, “Is there someone you would like to talk with at this time, perhaps someone from your faith community?”
- Some patients may ask you, “How much longer do you think I have?” ask “Tell me more about why you are asking this question.” and ask “What do you think/feel?” Since no one knows the exact answer, ask the patient what they have heard. Reassure the patient that a team member will follow up with them. Inform the nurse that this question has been asked.
- Help the patient maintain a realistic sense of hope, even in the midst of dying. Reframe hope by helping the patient hope for a good night’s rest, for better pain control today, or for the change to see grandchildren one more time.
- For some people, a way to communicate caring support may be with loving physical contact, such as holding hands, hugs, or gentle massage. Remember to ask permission before using touch, as some people may be uncomfortable with physical contact.
- Often, patients may talk to or see people from their past that have already died; this is normal and should not necessarily be dismissed as agitation.
- As death approaches, a patient may withdraw from everything outside of him/herself in an attempt to cope with the many changes that are occurring. Withdrawal is part of the natural dying process and usually does not mean that the patient is depressed or upset. Help family and friends understand that process is expected and normal.

Other HPNA Teaching Sheets on are available at [www.HPNA.org](http://www.HPNA.org)

#### Reference

Dahlin C, Communication in Palliative Care, In: B Ferrell & N Coyle eds. *Textbook of Palliative Nursing* 3<sup>d</sup> ed. New York: Oxford University Press: 2010;107-133.

Martinez J, Care at the time of dying. *Hospice and Palliative Nursing Assistant Core Curriculum*. Pittsburgh PA: The Hospice and Palliative Nurses Association: 2009;77-86.

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