

PATIENT ID LABEL

# Ongoing Care of the Dying Person

Use the ACE coding below, initial each entry and record details in the progress notes. Seek a second opinion or specialist palliative care support as needed.

<b>A C E codes:</b>	<b>A = Achieved</b> No additional intervention required	<b>C = Change</b> Intervention required and documented	<b>E = Escalate</b> Medical, NP or senior nurse review required and documented

Domains and goals	Date: / /						/ /					
	Time:	0400	0800	1200	1600	2000	2400	0400	0800	1200	1600	2000

**Te taha tinana – Physical health**

<b>Pain</b> The person is pain free at rest and during any movement.													
<b>Agitation/delirium/restlessness</b> The person is not agitated or restless and does not display signs of agitated delirium or terminal anguish.													
<b>Respiratory tract secretions</b> The person is not troubled by excessive secretions.													
<b>Nausea</b> The person is not nauseated.													
<b>Vomiting</b> The person is not vomiting.													
<b>Breathlessness/dyspnoea</b> The person is not distressed by their breathing.													
<b>Mouth care</b> The person's mouth is moist and clean.													
<b>Additional symptom 1</b> (as identified on pg 5) For example, the person is free of other distressing symptoms (like myoclonic jerks, itching). .....													
<b>Additional symptom 2</b> (as identified on pg 5) The person is not distressed by .....													
<b>Nurse initials each set of entries</b>													

	AM	PM	Nocte	AM	PM	Nocte
<b>Elimination (bowels and urination)</b> Outputs are managed with pads, catheters, stoma care, rectal interventions etc. <i>Note: Observe for distress due to any of the following: constipation, faecal impaction, diarrhoea, urinary retention.</i>						
<b>Mobility/pressure injury prevention</b> The person is in a safe and comfortable environment. Repositioning and use of pressure relieving equipment is effective.						

BINDING MARGIN – NO WRITING

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Domains and goals	Date:			/ /			
	Time:	AM	PM	NOCTE	AM	PM	NOCTE
<b>Te taha tinana – Physical health</b>							
<b>Hygiene/skin care</b> The person's personal hygiene needs are met. The person's whānau has been given the opportunity to assist with the person's personal care.							
<b>Food/fluids</b> Oral intake is maintained for as long as the person wishes. If in place, artificial hydration and feeding is meeting the person's needs.							
<b>Te taha hinengaro – Psychological/mental health</b>							
<b>Emotional support</b> Any emotional distress such as anxiety is acknowledged and support is provided.							
<b>Cultural</b> The person's cultural needs are acknowledged and respected.							
<b>Other psychological or cultural needs are being met</b> (as identified on pg 5) .....							
<b>Te taha wairua – Spiritual health</b>							
<b>Addressing spiritual needs</b> Religious and spiritual support is offered to the person and to their whānau as per the person's wishes.							
Other spiritual needs are being met (as identified on pg 5) .....							
<b>Te taha whānau – Extended family health</b> (these items refer to the health of the carers, not the person)							
<b>Emotional support</b> Any distress relating to issues such as grief and anxiety is acknowledged and addressed. The need for privacy is respected.							
<b>Practical support</b> Advice and guidance are offered according to the needs of the person's whānau.							
<b>Cultural support</b> The cultural needs of whānau are reviewed and care is mindful of these needs.							
<b>Communication</b> Communication is open to address any fears or concerns about the dying process.							
<b>Nurse initials each set of entries</b>							

BINDING MARGIN – NO WRITING