INTENSIVE CARE HOTLINE

Helping Families of critically ill Patients in Intensive Care improving their lives instantly so that they can have PEACE OF MIND, exercise power, influence decision making and stay in control of their and their critically ill loved ones destiny

5 things families do who have PEACE OF MIND, are in control, have power and have influence, whilst their loved one is critically ill in Intensive Care(you don't have to be a doctor or a nurse or know much about Intensive Care to be in control, feel powerful and influence decision making)

Ok, welcome to another Ebook in INTENSIVECAREHOTLINE.COM's Ebook series. And once again, congratulations on taking action in getting informed and taking control! Just by doing that you stand out from the rest of Families in Intensive Care and it will give you an edge when dealing with the challenges, difficulties and complexities in Intensive Care. Our Ebook series will help you find **your voice, will help you taking control, have power and influence decision making** in the jungle of complexities surrounding Intensive Care and it will more importantly help you to be in control, feel powerful and influence decision making.

In this report you'll discover the 5 things that separate Families of critically ill Patients in Intensive Care who have PEACE OF MIND, control, power and influence in the decision making process, from Families who feel helpless, who feel like they have no control and who feel like they are unable to influence decision making.

You and your Family can influence and control a lot more than you think you can and you can be powerful if you chose to be

As I have said in some of my other Ebooks before, a large amount of the outcome for your critically ill loved one in Intensive Care is influenced and determined by your and by your Families behaviour and attitude. You often do that consciously

or unconsciously. You therefore also influence and determine the outcome for your critically ill loved one to either the positive or to the negative.

One feature that certainly stands out for me when dealing with Families of critically ill Patients in Intensive Care, is the difference that I see in Family dynamics during the times when their loved one is critically ill in Intensive Care.

It's bad news if your Family dynamics are taking over

On the one hand there are the Families of critically ill Patients in Intensive Care who are not cohesive, who don't stick together and who may even have different interests and conflicts when dealing with the critical illness of their loved one in Intensive Care. Those Families usually suffer terribly and they usually have very little control, power and influence, because they can't resist in having their Family dynamics and their Family issues dictate their positioning, which is usually poor positioning. They are usually unclear of what they think is in the best interest for their critically ill loved one.

Families who have control, power and influence put their Family issues and Family dynamics aside

On the other hand there are the Families who feel and know that they have a lot of control, a lot of power and a lot of influence in the situation, where their loved one is critically ill in Intensive Care. Those Families are usually in a position where they are able to put their Family issues and their Family dynamics aside and speak with one voice and don't let their Family issues or their Family dynamics ruin their strong positioning.

As a side note, usually every Family that I dealt with in Intensive Care has Family issues and Family dynamics. It's nothing to be ashamed of. It's natural and it's human nature. I am certainly not suggesting that you need to change your Family dynamics during this crisis. That would be too much to ask and almost impossible. But you need to put them aside during this difficult and challenging period.

It's all about your positioning!

It also doesn't matter whether those Families are rich or poor, whether they are working class or academics. Your background has nothing to do with your level of control, power and influence. Your and your Family's level of control, power and influence is purely dependent on how well and how effective you can deal with your Family dynamics and Family issues during times of crisis and whether you can put those issues aside and act in the best interest for your critically ill loved one. If

you can do that, you are usually in a strong position and you can prepare yourself well mentally for what is about to come.

So let's get to the 5 things that those Families do who are in control of the situation, who have power and who influence decision making, even if they don't have any specific knowledge about Intensive Care!

1. **Families of critically ill Patients in Intensive Care are facing reality and accept reality as it is**

I have mentioned this previously. Families of critically ill Patients in Intensive Care who are in control, who have power and who are able to influence decision making, irrespective of whether they know anything about Intensive Care or about medicine are facing reality as it is!

The sad truth is that if you have come to this website looking for advice and insight, you have probably come, because you are facing challenges, struggles, difficulties, frustrations and fears that you didn't expect.

Never deny the situation and the reality that you are confronted with!

Now, here is the good news. Face the reality and the situation that your critically ill loved one is in as it is. Do not deny. Never deny the situation as it is, because the truth will set you free!

I have seen many Families in more than 15 years Intensive Care nursing in three different countries, who have denied the real situation that their critically ill loved one is in Intensive Care. Those Families usually struggle and suffer the most. The sooner you and your Family come clear with what you are dealing with the better it is and the easier it gets.

Now, you might say, "Patrik, you don't know what I am dealing with, because my critically ill loved one is going to die" or you might say, "Patrik, my critically ill loved one is facing a permanent disability or a negative impact on their future Quality of Life…" and the list could probably go on.

I can very much empathise with you if your critically ill loved one is approaching his or her end of life in Intensive Care and as you know, I have been dealing with many end of life situations in Intensive Care over the years.

But let's just take those two "worst case scenarios", that

a) your critically ill loved one is approaching their end of life in Intensive Care or
b) your critically ill loved one might face a permanent disability or a future with less or a limited Quality of Life

Don't underestimate the gravity of the situation and accept…

Those are tough realities to face and to deal with, don't get me wrong and I do not underestimate the gravity of the situation that you, your Family and your critically ill loved one are in. But the sooner you and your Family deal with the situation as it is and the sooner you accept the reality and the implications of the situation the better it is.

And once again, you might say, "Patrik, how can you say that I should accept that my loved one is dying in Intensive Care? How can you say that I should accept that my loved one is going to be permanently disabled or will have a limited Quality of Life in the future?"

I say that because, if for example your critically ill loved one in Intensive Care is approaching their end of life and if you don't accept it, other people will be in control, because you are still dealing with acceptance issues, rather than dealing with the end of life situation *effectively*.

What do I mean by that?

- **Once you have accepted a situation, that's when you can start influencing and controlling a situation and have real power**

Once you have accepted that your critically ill loved one in Intensive Care is not going to survive, you can look at the end of life situation differently and you can think about the situation in terms of

- How would my critically ill loved one want to approach his or her end of life?
- Who should be there when your loved one is approaching their end of life?
- Who should not be there?
- Can the end of life situation be timed and if so can we as a Family make the decision about the timing?
- If we do run out of time and the end of life situation can not be timed what are other things that need to occur before my critically ill loved one is going to die? Does my critically ill loved one want a priest, pastoral care etc…

- What are my critically ill loved ones and my Family's cultural, religious, spiritual and personal needs in such a difficult situation?

The list could go on and is not exhaustive by any means and the point that I want to make is that once you have accepted the reality of the situation, you can deal more effectively with the practicalities of the issues at hand.

Do not underestimate how important your and your Families input is in an end of life situation. If you don't guide the Intensive Care team around your wishes in an end of life situation, they will do it for you.

The situation that you, your Family and your critically ill loved one are in is unique and you want and need peace of mind

Keep in mind, having a loved one critically ill in Intensive Care and/or an end of life situation is unique and you don't want to leave the Intensive Care Unit with your loved one having lost their life, thinking that the situation could have been handled better. You and your Family want to have peace of mind and you can only achieve peace of mind if you exercise control, power and influence the decision making process in the end of life situation!

I have seen too many poorly handled end of life situations that left a bad taste for the Families and also for the Intensive Care staff.

Also, don't think that just because the Intensive Care Unit is dealing with end of life situations on a regular basis that they "know what they are doing". End of life situations are always challenging, even for people who have been involved in it many times.

Face reality as it is and your views are being heard

Make your views known and make your views heard, otherwise the Intensive Care team will determine the series of events during the end of life situation for you and for your loved one and you may or you may not agree with their views and with their approaches!

It also helps your and your Family's future mental well being and your coping mechanisms in the long run, if you had significant input in the end of life situation for your loved one. At the end of the day, it is your loved one who is approaching their end of life and not the 'ICU's loved one'!

The same applies if your critically ill loved one is facing a disability or is facing a limited future Quality of life.

At first you may not believe when the Doctors and nurses in Intensive Care are telling you about your critically ill loved one's diagnosis and the potential impact on their future. But once again, the sooner you are accepting the reality and the sooner you are facing this new reality, the sooner and the more effective you can deal with this new situation and also with the new challenges. You will be in a much better position to ask the right questions, to contact the right people and to prepare yourself, your Family and your critically ill loved one for the future.

I have seen far too many "messy" end of life situations and also far too many situations where Families of critically ill Patients in Intensive Care have been in denial about either the end of life situation or the future of their critically ill loved one, facing a disability or a limited Quality of life, because of their critical illness.

If this situation occurs and Families are in denial and are unable to face reality as it is, usually this is to the detriment of all parties involved. Situations can get very messy, with real power struggles, usually with the result that the staff in Intensive Care hold all the decision making power and whilst you and your Family are still in denial, other people are running the show and drive their agenda forward…

The minute you have accepted whatever situation you are dealing with, this is the minute you can

- Ask the right questions
- Give input into the situation
- Control your, your Families and your critically ill loved one's destiny in whatever unique circumstances they are in
- Look into the future
- Make arrangements

You are in a tough and difficult situation, I know that for a fact and I know that facing the reality that you, your Family and your critically ill loved one are facing may feel unreal. It takes courage and strength and the sooner you embrace your new reality, the more control, the more power and the more influence you have. Period!

2. **Families of critically ill Patients in Intensive Care are sticking together, no matter what**

This one really stands out! And it usually makes all the difference! If you and the rest of your family are sticking together during times of crisis no matter what, you'll make all the difference and you have control, power and influence!

What I have also found over the many years where I have been involved when dealing and counselling Families of critically ill Patients in Intensive Care is that they stick together and act as a united front during times of crisis, irrespective of whether they have difficult Family dynamics or whether they have any other Family issues. Those families know and understand that those issues or difficult dynamics need to be laid to rest during times of crisis and that the only thing that matters is their critically ill loved one and their well-being!

I have seen far too many Families of critically ill Patients in Intensive Care who are unable to put their Family issues and Family dynamics aside during times of crisis and act as a united front. This usually doesn't serve anyone and more importantly your critically ill loved one is the one suffering from this disharmony!

It's nothing to be ashamed of having difficult Family dynamics and you need to put them aside during times of crisis

As I have mentioned briefly before, it's nothing to be ashamed of having family issues or family dynamics that are difficult. Every Family has those dynamics, period! But because your, your Family and your critically ill loved one are facing a situation that is unique and difficult you need to find a way of putting those Family issues and Family dynamics aside and act as a united front in the best interest of your critically ill loved one!

If you do that you'll also act in the best interest of your Family. After all your Family is very important and even if you have issues and dynamics that you and the rest of your family don't like, maybe this is the time to reconsider how you are dealing with those issues and dynamics.

Furthermore, if you and your Family are united, stick together and act as a cohesive team, it's so much easier for you and your Family, to have control, power and influence when dealing with the Intensive Care team. If you and your Family are a cohesive and strong team it is so much easier to have control, power and influence and get the outcomes that you want!

Speak with one voice and be clear in what you want!

Speaking with one voice, knowing what you want and clearly expressing what you want and not having other family members questioning or interfering in those

dynamics is extremely important in your unique and difficult situation. And especially during this time of crisis and during the times when your loved one is critically ill in Intensive Care it can and usually does make all the difference.

Once again, there is a clear and measurable difference in how much control, power and influence you have, not only when dealing with the Intensive Care team, your critically ill loved one will also feel when you are one united front and your critically ill loved one will feel that you and your Family only have his or her best interest at heart.

Rally your Family together and make a positive impact!

Many Families who can't put their Family issues and Family dynamics aside during the times of crisis often have a negative impact on their critically ill loved one's recovery, because their critically ill loved one consciously or subconsciously feels the disharmony and he or she is therefore not recovering as quickly as he or she could do.

Sometimes your critically ill loved one may even deteriorate, recover slower or even die because of the disharmony within your Family.

Also, imagine your critically ill loved one is in an end of life situation. You and your Family don't want your Family dynamics or your Family issues dominate an end of life situation. Unfortunately, this is what often happens when critically ill Patients in Intensive Care approach their end of life. There is no peace and no harmony.

If you, your Family and your critically ill loved one are in the unfortunate and tragic situation that your loved one approaches their end of life in Intensive Care, your main goal should be to facilitate a peaceful and harmonic death for your loved one. You, your Family and your critically ill loved one want to have peace of mind. You don't want your family dynamics and family issues dominate the situation. I have been involved in many situations, either end of life situations or other situations in Intensive Care, where the Family dynamics and the Family issues were so difficult, that situations were getting very chaotic and were almost impossible to manage and this usually leaves a bitter taste in everybody's mouth and it usually doesn't help anyone. Peace and harmony are critical in such a difficult situation and you and your Family can usually only achieve it if you have unity!

If you are not united, the Intensive Care team will be running the show and drive their agenda

Intensive Care is a very stressful environment and usually any non- clinical issue, which is what Family dynamics are, only make it more stressful to the detriment of all parties involved.

Also, imagine, your critically ill loved one is in a very difficult and very critical situation. And as I have said in some of my other Ebooks, the health professionals in Intensive Care have their own ideas and their own agendas.

As you may know by now, there are a lot of moving parts and politics behind the scenes that you are usually unaware of that the Intensive Care team is trying to keep away from you at any cost. You may have gotten some more insight by now and if for example the Intensive care team wants to limit or withdraw treatment for your critically ill loved one in Intensive Care, but you don't want to have the treatment of your critically ill loved one limited or withdrawn and if other Family members think that it's the right decision- once again- the situation could become very difficult if not chaotic to manage and usually the situation can get easily out of hand.

The person who suffers the most is then your critically ill loved one, because he or she is in the hands of other people!

If you and your Family on the other hand are united, speak with one voice and you stick together no matter what, you will have a much easier task at hand to make your views and concerns heard and you'll also have a much easier time to control the outcomes that you want, you will have real power and you will be able to influence the decision making process around your critically ill loved one's care!

You, your Family and your critically ill loved one will be viewed very differently by the doctors and by the nurses in Intensive Care, you can believe and trust me on this one. Whilst the doctors and nurses in Intensive Care are certainly trying to deal with your loved one's clinical issues in the first place, messy and difficult Family dynamics usually distract everyone, from focusing on the main task, which is your critically ill loved one's well being and their recovery!

So, the bottom line and the main message here is to get your act together, leave the Family issues and Family dynamics alone and stick together no matter what! You will see the positive difference this will make for all parties involved, period!

3. **Families of critically ill Patients in Intensive Care are good at making "friends"**

This is another important one! As I have briefly mentioned in some of my other Ebooks, making "friends" and not letting the perceived power of a doctor or a nurse dictate the dynamics, is crucial for your level of control, power and influence that you exercise!

Most families of critically ill Patients in Intensive Care are intimated, fearful, overwhelmed and frustrated. They feel that they are out of their comfort zone and they feel that they have no or very little control, power and influence in the things that are happening around them.

Part of that feeling is that they perceive the nurses and the doctors in Intensive Care as people with *"perceived authority"* and people with a lot of *"perceived power"*. Think again. It's only perceived power and authority. It's not even real.

Many Families of critically ill Patients in Intensive Care think that because they don't know much or they don't know anything about Intensive Care or medicine in general that they need to "suck up" to the health professionals in Intensive Care. Because of that misguided and distorted thinking and because of that misguided and distorted perception, a lot of Families consciously or unconsciously are handing out and giving away their power on a "platter".

Don't *"suck up"* to health professionals and start treating them as your friends

The Families of critically ill Patients in Intensive Care who have control, power and influence decision making, are the one's who are not intimated and who don't *"suck up"* to the Doctors and Nurses in Intensive Care. Usually those Families have one thing in common. They are all very good at treating the doctors and nurses in Intensive Care as their friends and they don't *"suck up"* to them.

And it doesn't matter what their background is. Those Families come from all walks of life. It doesn't matter what their background or their level of education is. They just don't simply *"suck up"* to people, period!

And you and your Family need to stop *"sucking up"* to the doctors and to the nurses too. You might be doing it consciously or unconsciously. A lot of people do it consciously and they think it will bring them bargaining power in their situation. Nothing could be further from the truth. As I have said, if you *"suck up"* to the

doctors and to the nurses in Intensive Care and if you put them on a pedestal, because you think you can gain influence, you are on the wrong path.

Just because the health professionals in Intensive Care happen to be doctors and nurses working there, doesn't make them super human or doesn't make them smarter than other people.

Think about it, despite being health professionals in Intensive Care, they are also regular people outside of their work environment with their own personal lives and their own personal issues. So from now on, stop *"sucking up"* to the Intensive Care team, stop putting them on a pedestal and start treating them and start speaking to them as if they are your friends!

Yes, you have heard me saying that correctly. Stop *"sucking up"* to them, stop putting them on a pedestal and start treating them and start speaking to them as if they are your friends!

Families of critically ill Patients in Intensive Care who are in control, who have power and who influence the situation do this consciously or unconsciously and the fact of the matter is that they do it, regardless of why they are doing it and it generally works well for them.

Become a master of managing your relationships with the ICU staff and never ever give away your power

Those Families are the masters of managing their relationships within this difficult, challenging and unique situation and they don't have the *"perceived power"* or "*perceived status"* of a doctor or a nurse stop them from treating them as their friends and treating them as if they are equals.

And you can do it too. You just need to make the conscious decision that this is what you are going to do!

I can tell you from experience that the minute you and your Family feel intimidated by the *"perceived power"* and the *"perceived status"* of a doctor or nurse in Intensive Care, you are giving away all of your power, influence, control and status!

Not only are you putting you, your Family and your critically ill loved one in a difficult situation, you are also diminishing your level of control, your level of power and your level of influence! You are starting off on the wrong foot altogether and you are almost putting yourself, your Family and even your critically

ill loved one in a corner from the very start, that you will have difficulties to get out of!

By sucking up to the doctors and the nurses in Intensive Care and by putting them on a pedestal, you are adding on another layer of issues that you and your Family need to deal with.

Just start treating the Intensive Care team as your friends

The alternative is easy and a lot better. Just start making friends with the doctors and the nurses, talk to them just like you are talking to anybody else. See yourself as equals in the situation. And that is what you are. After all, it is your loved one who is critically ill in Intensive Care and not the doctors and the nurses loved one.

You might say, "but Patrik, how can I treat them as equals and as my friends? I don't think that I'm as smart, as influential and as powerful as a doctor or a nurse in Intensive Care is?"

Wrong path and wrong thinking altogether, so turn back. Your most important asset in this situation is your thinking and your perception about the situation. Your thinking and your perception of the situation has a lot of influence into the outcome of the situation and it is most often the only thing you can control!

So, just treat the people that you are dealing with in Intensive Care as your friends, period! It makes all the difference if you don't feel intimidated by the Intensive Care team and if you don't *"suck up"* to them! That doesn't mean that you shouldn't treat health professionals in Intensive Care with respect, but you would treat your friends with respect as well, wouldn't you?

So start treating the doctors and nurses as your friends from now on, because it's refreshing and it's counterintuitive. But going against the grain is often your best bet in such a unique and challenging situation anyway!

4. **Families of critically ill Patients in Intensive Care know what they want for their critically ill loved one**

This is another big point and another point that clearly separates Families of critically ill Patients in Intensive Care who have control, who have power and who have influence, from Families who don't have control, power and influence if their loved one is critically ill in Intensive Care.

And once again, knowing what you and your Family want for your critically ill loved one doesn't come down to knowing the specifics about Intensive Care or about medicine. It comes down to common sense and to your and your Family's uniqueness.

Of course, you want the best treatment and the best outcome for your critically ill loved one in Intensive Care.

You and your Family want everything to be done for your critically ill loved one, so that he or she can fully recover. You and your Family have no doubt and no questions in your mind how *"the best possible outcome"* can be achieved, after you have been informed by the Intensive Care team and after you have done your own independent research on INTENSIVECAREHOTLINE.COM's website.

You are bracing for setbacks in an unpredictable and volatile environment

Of course you and your Family are bracing yourself for setbacks, because you and your Family know by now that Intensive Care can be an unpredictable and volatile environment. You also know and understand the importance of unity within your Family during times of crisis, despite issues and despite difficult Family dynamics.

You and your Family know and understand that steering the course towards a good outcome and a good recovery for your critically ill loved in Intensive Care is dependent on your Families' cohesiveness and on your Families' ability to speak with one voice and not have Family dynamics and Family issues run the show.

But if you have read this far and if you have come so far, you also know that *"the best"* sometimes means cutting your losses and accept the reality that you, your Family and your critically ill loved one are dealing with.

Let's say you have come to the point that you and your Family know that your critically ill loved one is not going to fully recover and that your loved one might end up with a limited Quality of Life in the future, you also know that if this is the case that you and your Family need to brace yourself for the future steps that you need to take, in order to deal effectively with this new situation.

You may already know what steps you need to take. If you don't know what steps to take as yet, you probably have started thinking about it and you probably have the things in mind, what you and your Family think is best for your critically ill loved one. Keep that vision alive and keep holding on to that vision. Staying positive is half of the battle.

You also know that you, your Family and your critically ill loved one can deal with setbacks this situation is throwing at you and you also know that such is life and what doesn't kill you only makes you stronger.

Having the ability to let go

Knowing what you and your Family want for your critically ill loved one in Intensive Care sometimes also means that you and your Family need to be able to let go. You need to be able to let go when you feel like things are not going as planned and when you feel like things are getting out of hand.

I know that this is easier said than done, especially when the gravity of the situation demands that you and your Family confront the possible loss of your critically ill loved one.

As I have said before, coming clear with a situation and accepting reality as it is, is very challenging and it is usually the only way to move forward.

Once you have accepted that your critically ill loved one in Intensive care is not going to survive or not going to fully recover, you can then, once again, take further steps to accept the critical situation or the end of life situation and also focus on the things you can and want to control in either situation.

It is very important that you have input in any situation so that you and your family have peace of mind in such difficult, tragic and challenging circumstances.

You and your Family know your loved one best

Once again, if you and your Family know what you want for your critically ill loved one in any situation, including and end of life situation and you are clear and specific about it, you will have control, power and influence in the situation and you are not dependent on the Intensive Care team's decisions.

You and your Family know your critically ill loved one best and you also know your Family best. How would you, your Family and your critically ill loved one like this critical situation or an end of life situation to look like? What are your cultural, religious, spiritual or your individual needs? How much time do you have? Do you only have a few hours? Do you have a few days? Do you have weeks or months? Is there a possibility for your critically ill loved one to go home?

Once again, the minute you and your Family know what you want, that's the minute when you start controlling your destiny in whatever specific or particular situation you are in. Never be afraid to take a stand and make your views heard.

Never think that just because you are dealing with Intensive Care health professionals who have been involved in many critical situations and in many end of life situations that they know *"what's best"* for your critically ill loved one. The people who know best are you and your Family, because you know your loved one inside out!

Make sure you have peace of mind

To give you some specifics, you might want to think about addressing your critically ill loved one's individual, cultural, religious or spiritual needs during an end of life situation. Are there any people that you would like to come and see your critically ill loved one before he or she is passing away?

Think about it. The clearer you and your Family are, the more control, power and influence you have and more importantly, you feel like you have done the best you could and you will have peace of mind. This is very important, because if you don't take charge, if you don't take control and if you don't know what you want, those situations might leave a bitter taste for you and for your Family and you might feel remorseful.

5. **Families of critically ill Patients in Intensive Care have one spokesperson**

I have hinted towards that in some of my previous points in this report.

I know I keep repeating myself here and I'll say it again. Never have many people steering the ship. Only have one captain. That doesn't mean that other people shouldn't give input into the situation. But it usually changes the dynamics in your favour if you and your Family speak with one voice and have one spokesperson.

To give you an example again, I have seen many situations in Intensive Care, where the Family dynamics have been difficult and challenging and made situations very difficult and messy. Especially if there are differing and competing views within a Family about how the situation with your critically ill loved one in Intensive Care should be handled.

It goes back to number 2 in this Ebook, where "Families of critically ill Patients in Intensive Care are sticking together, no matter what"

Competing interests and what to do about them

Competing interests within a Family could mean that your critically ill loved one has a 'de-factor' partner and they are living together and they are not married. Your critically ill loved one also has children from a previous marriage/relationship. Both, the current de-factor partner and the children are claiming to be Next of Kin(NOK) and they both want the decision making authority.

Your critically ill loved one's de-factor partner claims that they have been living together for five years and therefore they want to be NOK. The children claim that the de-facto partner doesn't know your critically ill loved one as well as they do and they also argue that the de-facto partner wouldn't act in the best interest of your critically ill loved one.

Just by giving you this example, you can see how easily such an already difficult situation can get even more difficult. It doesn't serve anyone. And most importantly it doesn't serve your critically ill loved one in Intensive Care.

It makes it very hard for the doctors and the nurses too, because they don't know where they stand either. If for example your critically ill loved one needs a procedure or surgery that he or she is very likely unable to give consent to, your Family would need to sign the documentation for consent. Consent is usually signed by the Patients NOK if the Patient is unable to do so, which is the case most of the time in Intensive Care.

If the Family is still fighting for Next of kinship, it can delay procedures and also recovery time.

Make a decision and stick with it

This is only one example out of many I could give you, so that you understand why it's so important that you come clear who the spokesperson and also NOK for your critically ill loved one is or is going to be. Once you and your Family have made that decision, you must not change it and you should stick with it, period.

The other advantage of having one spokesperson and one NOK is that there are many situations in Intensive Care where people make phone enquiries about a particular Patient and they claim to be a relative of the Patient. Now, of course on the phone it would be very hard to determine whether it is a relative ringing or not. If the Intensive Care team is unsure about the identity of the caller, they can just say that they should ring the Patient's NOK in order to get information about the Patient.

The reality is that if the caller is really a family member, they will know what is happening and they will know who the NOK is and they will then get in touch with them.

I hope that this Ebook has served you well and I hope that you have gained even more insight of how you can effectively deal with your fears, frustrations, your struggles, your vulnerability and how you can turn the situation around so that you feel powerful, in control, influential so that you are mentally well positioned and mentally strong to deal with adversity! Hopefully I was able to 'elevate' your thinking and also to lift your spirits.

I also hope that I will see you in our other Ebooks so that you can find even more strength, more power, more energy, greater influence and also hope in your challenging journey through the Intensive Care landscape.

For more information on a variety of topics, within Intensive Care, check out more of our reports and Ebooks and also read our "**blog"** for more tips and strategies and the **"your questions answered"** section. Find the links here

http://intensivecarehotline.com/category/blog/

http://intensivecarehotline.com/category/questions/

You can also send me an email to support@intensivecarehotline.com if you have more questions

Sincerely, your friend

Patrik Hutzel