

INTENSIVE CARE HOTLINE

INTENSIVECAREHOTLINE.COM is INSTANTLY improving the lives of Families of critically ill Patients in Intensive Care, so that they can have PEACE OF MIND, exercise power, influence decision making FAST and stay in control of their and their critically ill loved ones destiny

please send your questions to support@intensivecarehotline.com or call us on

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INSTANT IMPACT REPORT

Congratulations and thank you that you are taking the time and more importantly that you are taking the initiative to seek out for help and to look for answers!

As I promised to you, here is your free “**INSTANT IMPACT**” report that will help you to instantly have PEACE OF MIND, take control, take power back and influence decision making fast, if your loved one is critically ill in Intensive Care. It will also help you to position yourself mentally and become mentally strong during this “once in a lifetime” challenge!

Just by doing that and by seeking out for help, you stand out from the rest of the Families in Intensive Care and it will give you an edge when dealing with the challenges, difficulties and complexities in Intensive Care.

This FREE report will help you find **your voice** in the jungle of complexities surrounding the critical illness of your loved one in Intensive Care.

I know that the situation you, your Family and your critically ill loved one in Intensive Care are in is challenging and difficult.

You and your family feel the fear, the anxiety, you know you are in a vulnerable situation, you're feeling overwhelmed, challenged, out of your comfort zone and frustrated!

What you get

In this FREE report you'll discover

- how to ask the doctors and the nurses the right questions
- how to eliminate fear, frustration, stress, struggle and vulnerability
- 5 “killer” tips& strategies helping you to get on the right path to making informed decisions, get PEACE OF MIND, control, power and influence in your situation
- you'll get [“behind the scenes” insight](#) so that you understand what is really happening in Intensive Care
- how to change your thinking and your behaviour that might hold you and your Family back to have more control, more power and more influence whilst your loved one is critically ill in Intensive Care
- how to control your emotions
- how you need to manage doctors and nurses in Intensive Care(it's not what you think)
- how to speak the “**secret** Intensive care language” so that doctors and nurses know straight away that you are an “insider” and that you know and understand what is really happening in ICU
- how to deal with critical situations and end of life situations
- how to manage the rest of your family during this “once in a lifetime” challenge

Helping you to deal with massive challenges

Furthermore, in this FREE report you will discover how you overcome your fears, your frustrations and your struggles in this challenging situation, whilst you will also discover how you need to mentally position yourself and your family well, so that you and your Family are mentally strong so that you can influence decision making, have real power and real control fast!

In essence the Intensive Care team is not used to be dealing with Families who do their own research and as a result make informed decisions, get PEACE OF MIND, control, power and influence!

If anything, the Intensive Care team is used to “call the shots”, to drive the bus and therefore drive their own mainly [“hidden agenda”!](#)

Five “killer” tips& strategies that will help you get on the right path to PEACE OF MIND, control, power and influence

In this FREE “**INSTANT IMPACT**” report I’ll give you five killer tips and five “mind blowing” strategies that will immediately set you apart from the rest of the Families of critically ill Patients in Intensive Care.

99% of the families of critically ill Patients in Intensive Care make no informed decisions, have no PEACE OF MIND, no control, no power and no influence.

You can see it in their poor body language and poor posture and you can hear it in their weak tone of voice!

Implement the strategies I’ll show you and you can shift the dynamics in your relationships with doctors and nurses straight away!

And I’ll promise that you will feel like you are making informed decisions, have PEACE OF MIND, control, power and influence in this challenging situation irrespective of what your critically ill loved one is going through, because most Families of critically ill Patients in Intensive Care do feel extremely frustrated, vulnerable, challenged and overwhelmed with the situation they are finding themselves in.

The free “**INSTANT IMPACT**” report is leading you through the first steps you need to take in order to be impactful, powerful and in control whilst your loved one is critically ill in Intensive Care.

This will also give you and your family tremendous PEACE OF MIND!

There are many more free and paid resources for you and your Family on our www.intensivecarehotline.com website that will tie right in with this report and that will help you going through this challenging and “once in a lifetime” journey.

You will find links to [more free](#) and [paid resources](#) towards the end of this report.

Other people are making decisions and what you need to do about it

As you have probably figured out by now, with your loved one being critically ill in Intensive Care, other people are making decisions for you and for your critically ill loved one in Intensive Care and other people are in charge!

If you have come to [INTENSIVECAREHOTLINE.COM](https://www.intensivecarehotline.com) you are probably seeking for answers, you are seeking for help and you are seeking advice, because you are way outside of your comfort zone, you are overwhelmed, you feel vulnerable, you are scared and you are frustrated because your loved one is critically ill in Intensive Care and other people are driving the bus so to speak.

You may or may not have knowledge about hospitals and about Intensive Care, but what is really frustrating you the most is that other people are making decisions and you may feel like the doctors and nurses in Intensive Care are talking over you or at you, rather than entering into a genuine dialogue with you!

What frustrates you the most is that your loved one is critically ill in Intensive Care and by the time you are reading this you may still have no clear picture as yet, how unwell your critically ill loved one really is and what exactly the future has in stall.

In more than 15 years Intensive Care Nursing experience in three different countries, where I have also worked as a Nurse Unit Manager for 5 years, I have seen many Families of critically ill Patients frustrated, vulnerable and overwhelmed with the situation that they and their Families find themselves in after their critically ill loved one has been admitted to Intensive Care!

I have personally guided hundreds or even thousands of Families through this difficult and challenging situation by encouraging, by empowering, by advocating and by guiding them to control the situation and influence decision making fast.

There is very little- if any- immediate help, support or guidance for Families of critically ill Patients in Intensive Care

There is very often no immediate help, advocacy or guidance for Families of critically ill Patients in Intensive Care and that's why Families often feel overwhelmed, why they feel way outside of their comfort zone, why they feel frustrated and why they feel left alone.

There is very little or no advocacy for Families of critically ill Patients in Intensive Care and there just simply isn't enough support during this "once in a lifetime" situation!

This FREE report is designed to help you and your Family to get PEACE OF MIND, get control, have power and be more influential and help you to get quick insights in what is really happening in Intensive Care and our reports/ videos and audio recordings are designed to help you find balance during this difficult and challenging time in your life.

The report is designed to give you a good understanding of what is really happening in Intensive Care and how it impacts on you, your Family and of course how it impacts on the care and treatment for your critically ill loved one.

I know that you often rely on clues of what is said and what is not being said and it can be hard to interpret all the “noise” of the verbal and the non-verbal things of the Intensive Care team.

Therefore you need a quick Intensive Care “crash course” so that you understand how an Intensive Care Unit operates and functions so that you can quickly make informed decisions, get more power, more control, more influence and of course PEACE OF MIND!

Your thinking, your mindset, your reaction and the presence you have in this challenging, difficult and often heartbreaking situation- more often than not- determines your level of control, your level of power and your level of influence in your, your Family’s and in your critically ill loved one’s life.

You might say and think that the doctors and the nurses in Intensive Care are working extremely hard and they maybe doing the best for your critically ill loved one and I am not questioning their integrity and dedication to their work.

INTENSIVEHOTLINE.COM’s mission is to help you and your Family with our FREE “INSTANT IMPACT” Report and other FREE and paid resources on our website so that you know what you can and what you need to do in order to get your focus of control, focus of power and influence back!

You want and you need to be mentally well positioned and mentally strong to be able to deal effectively with whatever this challenging and “ONCE IN A LIFETIME” situation is throwing at you, your Family and at your critically ill loved one.

The Intensive Care team doesn’t often make the time to explain to you and your Family what is really going on and they certainly don’t want to let you look [“behind the scenes” in Intensive Care.](#)

The truth of the matter is however that it's ["behind the scenes"](#) where a lot of the decisions are made that the Intensive Care team then often presents to you as a "matter of fact"!

It's more often than not ["behind the scenes"](#) where the Intensive Care team is doing "the work" in how they present and position your critically ill loved one's prognosis and diagnosis that helps to drive the Intensive Care team's agenda!

So let's get into the juice of the report and start with

INSTANT IMPACT #1

Acknowledge your fears, your frustrations and your struggles and then deal with them effectively

Now, the situation that you, your family and your critically ill loved one are in is not an easy one. In fact, it's a bloody difficult and challenging situation that you, your family and your critically ill loved one in Intensive Care are in.

I have seen this situation over and over again that Families are totally out of their comfort zone, overwhelmed, challenged and frustrated when their loved one gets admitted to Intensive Care.

And guess what- it's ok. It's ok to be frustrated, fearful and vulnerable, because you don't know what is about to happen. Most Families that I see in Intensive Care are fearful and scared.

In fact they are usually scared to death and more often than not, they are trying to pretend that they are not scared and that everything is ok.

Nothing could be further from the truth and obviously, because I have seen and dealt with Families of critically ill Patients in Intensive Care over and over again on an almost intimate level, you get a feel for what is really going on inside of them.

So strategy #1 therefore is, it's ok to admit to yourself and to others that you are scared, that you are fearful, that you are frustrated and that you are way outside of your comfort zone!

The sooner you admit to yourself that you are overwhelmed and that you might even feel desperation, the better it is for you moving forward and taking the action that you already know you need to take!

There is nothing wrong with having those feelings. You are only human. It's not a sign of weakness to have and feel those feelings.

It would however be a sign of weakness if you were trying to manage this challenging, difficult and "ONCE INA LIFETIME" situation all by yourself without seeking for help of the people who know what to do!

Learn how to quickly control your emotions so they don't control you

But it is critically important that you acknowledge and admit those feelings to yourself and to others. Try not to pretend. Once you have come clear that this is how you feel and you can show it to others as well, you are in a much better position to deal with those emotions efficiently and you will be able to control and change those emotions.

Only after you have come clear that this is the new situation that you, your Family and your critically ill loved one in Intensive Care are dealing with and that this situation is stirring strong emotions inside of you, only then can you start managing those emotions and also change those emotions.

Turn a perceived weakness into strength. Don't try to undermine or suppress your emotions. You can feel those emotions and you can and you even should feel those emotions fully, because feeling those emotions is a good and a healthy sign, you just can't have those emotions controlling you.

Feeling those emotions will make you stronger and will make you more determined, but if you let those emotions control you, you are doomed. It's true what they say that what doesn't kill you only makes you stronger.

So acknowledge that this is how you feel and use those emotions to your advantage, by changing those emotions into resolve, determination and strength.

INSTANT IMPACT #2

Stop putting the Intensive Care team on a pedestal and do not "suck up" to them

Over and over again do I see Families of critically ill Patients showing far too much respect for doctors and for nurses in Intensive Care, to the point where they "suck up" to them.

Now, there is nothing wrong with having respect for other people, but stop showing too much respect for the Intensive Care team and under no circumstances do “suck up” to them.

Families of critically ill Patients in Intensive Care not only show too much respect for doctors and for nurses and they most of the time “suck up” to them and put them on a pedestal. Stop doing that and stop doing that right now!

It's so critically important that you don't put the Intensive Care team on a pedestal! I see almost 99% of Families of critically Patients in Intensive Care making this big mistake over and over again and if you are doing this you are handing over your power on a platter.

If you are doing this then there is almost nothing I can do for you!

In fact if anything, the doctors and the nurses might lose their respect for you if you keep doing it!

You might do it unconsciously and you might be unaware of that you are doing it, but stop doing it right now and make friends instead.

Most Families of critically ill loved Patients in Intensive Care are so overwhelmed by their emotions that they can't control their emotions and therefore they are feeling weak and that's why they consciously or unconsciously “suck-up” to the doctors and the nurses and by doing that they give away all of their power.

Make friends with health professionals instead

So the alternative is to just start talking to them as if they are your friends. Don't see them as a doctor or as a nurse, just start seeing them as your friends. Don't think about that your critically ill loved one's life in Intensive care is in their hands.

Also, act with confidence, speak clearly, be articulate and be clear in what you want as well. If you do just that, if you stop “sucking up” to the Intensive Care team, if you stop putting them on a pedestal and if you start talking to them as if they are your friends, you have gone further than most other Families in Intensive Care ever will!

By not “sucking up” to the Intensive Care team, by being different, by not giving in to the “perceived power” and the “perceived authority” of the Intensive Care team, your level of influence, your level of control and your level of power has increased tenfold. You can literally see the dynamics shift straight away.

And as a nice and also important by-product you have PEACE OF MIND!

Doctors and Nurses are only human beings too

What goes hand in hand with Families “sucking up” to doctors and nurses and putting them on a pedestal, is that some people think “oh, he or she is a doctor or he or she is a nurse, so they must be smart”.

Now, I don't care what your level of education is, but you need to stop thinking that way. Whatever level of education you have or the doctors or the nurses have, it doesn't matter.

Look at the situation differently and know that you, your Family, your critically ill loved one, the doctors and the nurses are all in one boat. You are all in this together.

The universe has brought you all together in this particular situation, regardless of where you, your Family, your critically ill loved one, the doctors and the nurses have come from and regardless of where you are going to.

Just change your point of view, look at it differently, do not think about the doctors and the nurses as being “smart” or think that they are any smarter than you are and just look at them as being your friends.

Always remember, there are plenty of other things and areas in life where you have tremendous expertise and knowledge about, where a doctor or a nurse wouldn't have a clue about.

Be confident and ask questions

You might think, “Patrik, but I don't know anything about Intensive Care or I don't know enough about my loved ones critical illness, so I can't act confident and self- assured.”

Now, here is the thing. You may not know as much as the Intensive Care team knows about the critical illness of your loved one, but you'll be surprised by

- How much you can find out about your critically ill loved one's situation in a short period of time just by asking the right questions and you can find out quickly what questions to ask just by looking at our [FREE](#) or [paid resources at INTENSIVECAREHOTLINE.COM](#) and just by simply doing your own research

- You will also be surprised that by just standing out from the crowd and by standing out from other Families of critically ill Patients, how much more influence, power and control you can have during this challenging, difficult and frustrating situation. Once again, you will stand out by acting confident, by treating the Intensive Care team as your friends and by showing them that you are not intimidated by their “perceived power” and by their “perceived authority”! Keep asking questions. Don’t make the mistake of not asking questions and don’t assume that the Intensive Care team will tell you everything that you need to know. They simply won’t tell you everything you need to know, because they are busy people. Furthermore, health professionals in Intensive Care are like “fish in water” and therefore they can’t always see what questions you might have that are obvious to them because they do it day in and day out and they live and breathe the environment

INSTANT IMPACT # 3

Face reality as it is

Ok, here you are. Your loved one has just been admitted to Intensive Care and after [the first meeting with the Intensive Care team](#) you might get told that your critically ill loved one has been severely injured and the Intensive care team thinks that your critically ill loved one will not survive their ordeal.

Or you might get other, less devastating news, but you still get bad news and the Intensive Care team might tell you that your critically ill loved one is likely to survive their critical illness, but they might also tell you that your critically ill loved one might be permanently disabled or might not have the same quality of life than before the admission to Intensive Care.

Whatever challenging or difficult situation you are in, face it. It is so critically important that you face the situation head on, no matter what. I know it’s a tough call and whatever the situation you don’t want to face looks like, it’s so important for your own and for your Family’s emotional well being and sanity in the long term.

You will of course feel challenged, frustrated, anxious and vulnerable and if you are in a situation where your critically ill loved one is not going to survive their ordeal in Intensive Care or where your critically ill loved one’s admission to Intensive care

has a massive negative impact on their future life, it is devastating, frustrating and challenging without any doubt, period!

Coming clear with what you are dealing with(must read)

But the sooner you come clear with what you are dealing with, the sooner you also come clear about what it is that you, your Family and your critically ill loved one need and what you need to be doing in this particular situation.

More importantly, as soon as you face reality as it is, you will start actively looking for the right questions to ask that will point you in the right direction of what to do next.

This could be as simple as

- Asking what support is available for your loved one after discharge from Intensive Care and after discharge from hospital
- Questioning the approach of the Intensive Care team in an end of life situation, i.e. would your critically ill loved one be better off in a different room or area in the ICU, where it's quieter and where they can have more privacy and dignity?
- Asking for a different doctor or nurse, as you feel like your critically ill loved one is not receiving the best possible care(don't be afraid to do so, if you are in doubt)
- If your critically ill loved one is in an end of life situation and the Intensive Care team suggests to [“withdraw treatment”](#) or to [“withdraw life support”](#) and you and your Family don't agree, or don't agree as yet or you want more time to think and absorb everything that is happening, you should also ask for the Intensive Care Unit's policy about “end-of-life care” or “withdrawing of treatment policy”. Don't be afraid of doing that and don't be afraid of speaking up. If Intensive Care teams are ethical and follow the right procedures and processes they will not be hesitant in letting you have access to those policies. **By just doing that the power will shift immediately!**

It's simple, it is your damn right, if not your responsibility and hospitals need to be transparent. You want to get as much information as possible. You also want to have as much power, control and impact as possible. It could well be that the Intensive Care team is trying to pressure you to agree to [“withdraw treatment” or “limit treatment”](#) on your critically ill loved one and you are still waiting for some relatives to come in from overseas or from interstate and you don't want to let your critically ill loved one go without some key Family members being around. If that's the case you need to make that crystal clear to the Intensive Care team.

Focus on what you can control

Before I go off on a tangent here, I need to reel myself back in and come back to our initial point that you need to face reality as it is and once you have come clear with your emotions, your overwhelm, your frustrations, your vulnerability and your fear, it's time to focus on what you can control.

I have given you some hints above on what you can control.

99.9% in life you can't control. If you focus on the 0.1% that you can control and you become a master of what you can control, you are in charge of your own destiny!

INSTANT IMPACT #4

Know what you want and be crystal clear about it

To know and to be crystal clear about what you and your Family want in Intensive Care for your critically ill loved one in this challenging and difficult situation can make all the difference to the outcome! That's why it is so important for you, for your Family and for your critically ill loved one that you know what you want.

It's very likely that you and your family will need to make decisions for your critically ill loved one, as they are not in a position to make their own decisions.

Now, you might say Patrik, "how do I know what I want, if I don't even know what the next few hours might have in stall?"

And you are right, if you have come to this report and you are looking for advice, you might not know what the next few hours have in store for you, for your Family and for your critically ill loved one.

Intensive Care can be a very unpredictable, challenging and volatile environment. How do you actually deal with that?

Know what to do in specific situations

OK, here is the thing that you need to know. This fourth INSTANT IMPACT strategy ties right in with INSTANT IMPACT strategy #1(Acknowledge your fears, your frustrations and your struggles and then deal with them) and INSTANT IMPACT STRATEGY #3(Face reality as it is).

If you haven't read those strategies, go back and read them, because they tie right in with this INSTANT IMPACT strategy#4 "know what you want" strategy.

So after you have acknowledged your fears, your frustrations, your struggles and you have dealt with them and after you have faced reality as it is- and I am well aware that you, your Family and your critically ill loved one in Intensive Care might face a stark reality- you need to think clearly about what the best outcome in this particular situation looks like for you, for your Family and for your critically ill loved one!

You also need to be specific about the outcomes that you want. Very few people are specific about the outcomes they want and they keep it too general.

After you have done the reality check, you need to get an understanding and a clear picture of what your critically ill loved one in Intensive Care might be in for and you need to get an understanding of what your critically ill loved one's prognosis is going to be!

To do that you can get a lot of free information on this website, about most clinical pictures and admission scenarios to Intensive Care, which will be giving you a lot of insight. Go to the "intensive care insights in a nutshell section" and find your loved one's condition/ admission scenario there or look in the same section for "your loved ones treatment in Intensive Care".

You also need to listen carefully to the doctors and the nurses, pay careful attention to what and how things are said. Pay also careful attention to what is not being said. Pay careful attention to their body language and to their tone of voice.

And most importantly you need to start asking the right questions!(this website and our free and paid [Ebooks, Videos, Audio recordings](#) and our tailor made [ONE on ONE consulting](#) are giving you a lot of insights of what questions you need to ask)

You need to listen carefully though of what is being said and what is not being said. You must start reading between the lines!

Also, keep in mind that the medical staff in particular might have a more negative outlook compared to what is really possible and what is really happening, for a number of reasons(I am shedding more light on those reasons in my report about

[”The 10 things you didn’t know are happening BEHIND THE SCENES in Intensive Care that hold you back from having PEACE OF MIND, control, power and influence whilst your loved one is critically ill in Intensive Care”](#),

which you can find in our products section here

www.intensivecarehotline.com/products

Also, know that when I say that you need to know what you want and you need to be specific about it, you need to adapt the “what you want” to your and your critically ill loved one’s particular situation in Intensive Care. I’ll give you an example so that you understand what I mean.

Running you through some scenarios and examples so you know what to do (essential reading)

Let’s say your critically ill loved one has just been admitted to Intensive Care after a severe car accident and your loved one sustained severe head injuries, sustained massive rib fractures, a broken pelvis and a fractured shin bone.

Your critically ill loved one is 45 years of age and you and the rest of your family are absolutely shocked and devastated!

The Intensive Care team has told you that your loved one is extremely unstable, not only because of their severe head injuries, but also because of the rib fractures that cause difficulties ventilating your critically ill loved one and the fractured ribs also put pressure on your critically ill loved one’s heart so that their heart went into an irregular heart rhythm.

Your critically ill loved one has also lost a fair amount of blood due to severe bleeding from the pelvis. Some of the blood loss has been replaced by giving blood transfusions.

Despite the fractured pelvis and the fractured shin bone, your critically ill loved one has not had the pelvis or the shin bone surgically repaired as yet, as your loved one is too unstable to go to theatre for surgery.

The Intensive Care team is working extremely hard to save your critically ill loved one's life, but the scenario that I am explaining is an extremely difficult and challenging scenario, not only from a clinical point of view, but also from your and your Family's point of view, because you don't know what is about to come!

It would also be difficult for the Intensive Care team to exactly predict the future for your critically ill loved one. In order for you to understand and also know what you want in this situation requires an understanding of what might happen in this particular situation that you, your Family and your critically ill loved one are in.

In our example (and in most other situations in Intensive Care), 5 things may happen

1. Your critically ill loved one is going through a long and burdensome stay in Intensive Care and is going to fully recover. This usually takes time and may require rehabilitation after the Hospital stay
2. Your critically ill loved one is going through a long and burdensome stay in Intensive Care and will be left with some impairments or he or she may be left with a permanent disability. This will take time and may require some out of hospital rehabilitation as well. The Intensive Care team also thinks that a good Quality of life is possible despite the impairment or disability
3. Your critically ill loved one may go through a long and burdensome stay in Intensive Care and may not recover and pass away within a foreseeable time frame, usually a few days or within the next week
4. Your critically ill loved one may become so unwell and unstable because of the severe nature of their injuries that they are rapidly

approaching their end of life and their life may be slipping through the fingers of everyone quickly and they may pass away relatively quickly within few hours or a couple of days

5. Your critically ill loved one may show signs of slow recovery and stability and the Intensive Care team thinks that if your critically ill loved one would survive their ordeal in Intensive Care, they would be permanently disabled with the consequences that your critically ill loved one would have no Quality of Life. This would very likely be a cause of the severe head injuries and the Intensive Care team expects your critically ill loved one to be permanently and severely disabled with no or very little Quality of Life. Therefore they suggest a [“withdrawal of treatment”](#) might be in the “best interest” of your critically ill loved one to not prolong your loved one’s suffering.

I have tried to condense this example and I know that these are grim scenarios in the example that I have used. But if you have come this far, you are probably in a situation where you need to take a closer look at some of the outcomes.

I hope that your, your Family’s and your critically ill loved one’s situation is much better than my example. But you can certainly adapt my example to your and your critically ill loved one’s unique situation, learn the right lessons from it and more importantly implement strategies to get what you want, without being dependent on the Intensive Care team’s agenda!

Your and your Family’s job in your particular situation is to find out what the future has in stall for your critically ill loved one and then get very clear of how you would like the future to look like in your situation, irrespective of the odds you might be facing currently.

Looking at possibilities and solutions for each scenario

Thinking ahead and be positive

1. **Your critically ill loved one is going through a long and burdensome stay in Intensive Care and is going to fully recover. This usually takes time and may require rehabilitation in a rehabilitation facility after the Intensive Care and Hospital stay**

Ok, in our particular scenario and example, with your critically ill loved one in Intensive Care with severe head injuries, rib fractures and a fractured pelvis, the doctors and the nurses are cautiously optimistic and they think that your critically ill loved one will stay in Intensive Care for a considerable period of time, maybe a few weeks or maybe even one month or more and they think that your loved one will very likely make a full recovery.

That's great news. It will be a long road to recovery, but you are already thinking in your mind that you'll do whatever it takes.

That's a great starting point and a good attitude to have.

So, your critically ill loved one is very likely facing many weeks of acute and intensive treatment in Intensive Care with high level nursing care.

Your loved one is likely to [require mechanical ventilation and they may require a Tracheostomy](#) to facilitate smooth ventilation and your critically ill loved one may require surgery for their pelvis fracture and for their fractured shin bone. The Intensive Care team is also positive that your critically ill loved one will recover from their [severe head injury](#).

Those are the facts and that's great news. Now you and your Family can brace yourself for long hours in Intensive Care, which will cost you time and energy, but once again, you are prepared to do "whatever it takes" and you can make arrangements.

So what do you want out of this situation?

You are relieved that your critically ill loved one is on their way to recovery and you can foresee that the next few weeks are going to be stressful.

Besides the doctors and nurses facilitating the treatment and recovery of your critically ill loved one, are you happy about the treatment and are you happy with how things are handled?

Are you happy with how the Intensive Care team is dealing with you and your Family? Are you regularly updated with events and your loved one's progress?

Is the Intensive Care team regularly updating you in [Family meetings?](#)

Do you and your Family feel safe and do you feel like your critically ill loved one is in the best possible hands?

Do you think that the Intensive Care team is transparent in their treatment and in their communication with you? If you can confidently answer “yes” to all of these questions great.

If you can't confidently say “yes” to all of these questions think again. What can be improved? What can be done better? Is it communication? Is it the level of medical or nursing care?

Is it the room or bed space that your critically ill loved one is in? Would there be a better room or bed space for your critically ill loved one to be in, maybe with more natural daylight, once they are more awake?

Do you feel like one particular doctor or one particular nurse is not giving your critically ill loved one the attention and the treatment they need?

Don't think that because your critically ill loved one is going to recover and because you think that most doctors and nurses are working towards achieving that goal that there aren't things that can't be improved.

There are a lot of things happening [“behind the scenes” in Intensive Care](#) that you are completely unaware of!

Those things may impact on the time frame and the speed of your loved one's recovery, i.e. theatre or surgery time for your loved one may get delayed or cancelled.

If that's the case, keep asking why the delay or cancellation and keep pushing and asking. Very few Families of critically ill Patients in Intensive Care do ask or do push because they are intimidated by the “perceived power” and by the “perceived authority” of the Intensive Care team and if you do, see what happens and notice the difference. You will be miles ahead of the 99% of families of critically ill Patients in Intensive Care who are intimidated by the “perceived power” and by the “perceived authority” of the Intensive Care team!

Don't be afraid and always be courageous! See and find out what you can influence. Don't be afraid. It can and will make all the difference!

Think ahead and don't be afraid to speak up!

- 2. Your critically ill loved one is going through a long and burdensome stay in Intensive Care and will be left with some impairments or they may be left with a permanent disability. Your critically ill loved one's**

recovery will take time and may require some out of hospital rehabilitation as well. The Intensive Care team also thinks that a good Quality of life is possible despite the impairment or disability.

Ok, in this particular scenario, you have of course hoped for more and for better news and you hoped and wished that your critically ill loved one would actually make a full recovery. Despite getting the bad news that your critically ill loved one is not going to fully recovery, you are of course relieved that your loved one is going to survive, as you were obviously very concerned that your critically ill loved one would not survive their ordeal.

The doctors and the nurses have told you that your critically ill loved one will need to spend a long time in Intensive Care and it will take time to get your critically ill loved one out of ICU.

You have taken the good and the bad news in and you are prepared to put up with the long hours in Intensive Care and you can make arrangements to organise your and your Family's life around it.

In terms of the impairment your critically ill loved one is facing, the Intensive Care team has told you that your critically ill loved one will very likely take a long time to be able to walk again.

They are concerned that with the severity of the pelvis fracture and the shin bone fracture that your loved one may limp when back on their feet and they may end up with a stiff leg.

That's a massive shock for you and for your Family, let alone for your critically ill loved one once they are awake.

Your critically ill loved one loves being active, loves sport, running and all kinds of other activities.

Whilst you and your Family are relieved that your critically ill loved one is going to survive, you don't know how to react to those news.

What do you do? How do you react? What can you control in such a situation?

It's a difficult question and once again it ties right in with INSTANT IMPACT strategy #1 and INSTANT IMPACT strategy #3 and you need to stare reality in the eye and you need to acknowledge you fears, your frustrations, your vulnerability and your struggles around this difficult and challenging situation.

Once you have done that you then can deal more effectively with the situation at hand.

So your critically ill loved one is facing this disability or impairment once they are out of Intensive Care and you and your Family of course are scared of how your loved one might cope or react to this impairment or disability.

What will it mean to your loved one? What will it mean for you and your Family? Whilst you can't answer these questions for sure at this point in time, you can certainly think ahead and try and implement strategies so that once your loved one wakes up in Intensive Care and needs to face the impairment/disability part, that you give them their unconditional love, your full attention and full support.

Know what that looks like. You know your critically ill loved one best and you know what they need and respond to. Make sure that your critically ill loved one gets good physiotherapy and early mobilisation.

Don't waste any time. The sooner your critically ill loved one will be back on their feet, the better it is and the better and the quicker your loved one will recover and deal with the adversity.

Research has shown that people with disabilities, even when diagnosed with paraplegia or quadriplegia, are going back to the same level of happiness than before they have acquired the disability.

So be positive and control the things you can control. Also, don't forget, your loved one is alive and that's a great thing!

Besides the Intensive Care team facilitating the treatment and recovery of your critically ill loved one, are you happy about the treatment and are you happy with how things are handled?

Are you happy with how the doctors and nurses are dealing with you and your Family? Are you regularly updated with events and your loved one's progress?

Is the Intensive Care team regularly updating you in [Family meetings?](#)

Do you and your Family feel safe and do you feel like your critically ill loved one is in the best possible hands?

Do you think that the Intensive Care team is transparent in their treatment and in their communication with you?

If you can confidently answer “yes” to all of these questions great. If you can’t confidently say “yes” to all of these questions think again. What can be improved? What can be done better?

Is it communication? Is it the level of medical or nursing care? Is it the room or bed space that your critically ill loved one is in? Would there be a better room or bed space for your critically ill loved one to be in, maybe with more natural daylight, once they are more awake?

Do you feel like one particular doctor or one particular nurse is not giving your critically ill loved one the attention and the treatment they really need?

Don’t think that because your critically ill loved one is going to survive and because you think that most doctors and nurses are working towards achieving that goal that there aren’t things that can’t be improved.

There are a lot of things happening [“behind the scenes” in Intensive Care](#) that you are unaware of and those things may impact on the time frame and the speed of your loved one’s recovery, i.e. theatre or surgery time for your loved one may get delayed or cancelled.

If that’s the case, keep asking why the delay or cancellation and keep pushing and keep asking.

Very few Families of critically ill Patients in Intensive Care do ask or do push because they are intimidated by the “perceived power” and by the “perceived authority” of the Intensive Care team and if you do, see what happens and notice the difference.

You will be miles ahead of the 99% of families of critically ill Patients in Intensive Care who are intimidated by the “perceived power” and by the “perceived authority” of the Intensive Care team!

Very few people do ask or do push, but if you do, see what happens and notice the difference.

Don’t be afraid and be courageous! See and find out what you can influence. Don’t be afraid. It can and will make all the difference.

How you effectively deal with an end- of- life situation

3. Your critically ill loved one may go through a long and burdensome stay in Intensive Care and may not recover and pass away within a foreseeable time frame, usually a few days or within weeks

If your critically ill loved one is actually going to approach their end of life, how would you like that to occur? Is there enough time to keep your critically ill loved one alive until you and your Family had enough time to say goodbye?

Is there enough time to make sure that your, your Family's and your critically ill loved one's cultural, spiritual and religious needs have not only been considered, but also met?

Is there enough time to get other relatives and/or friends to say good bye or do you need more time for other relatives to come in from overseas or interstate?

If your critically ill loved one is approaching their end of life in Intensive Care, you want to make sure that you and your Family have as much peace of mind, control, power and influence as possible in this situation, as the memories of the event will stay with you for the rest of your life!

Depending on your and your critically ill loved one's situation, can you negotiate more time to keep your critically ill loved one alive until all those wishes have been fulfilled?

Remember, a lot of things in life are negotiable and you need to keep asking for what you and your Family want and believe in, no matter what!

If your critically ill loved one is actually approaching their end of life, it is a "once in a lifetime" situation and as sad and as devastating this situation is, you and your Family want to and need to have peace of mind, control, power and influence! I will tell you why this is so important in a moment!

Furthermore, the Intensive Care team often have their own ["hidden agenda"](#) as more often than not the way the Intensive Care team will position your critically ill loved one's prognosis and diagnosis depending on what's happening ["behind the scenes" in Intensive Care!](#)

It is therefore why you need to "read between the lines" and it is therefore that you need to get peace of mind, control, power and influence very quickly and as much as you possibly can so that your critically ill loved one, who is approaching their

end of life, can have a private and dignified death surrounded by you, by your Family and friends when the time has come.

And more importantly, you need to very quickly start questioning the Intensive Care team and their “perceived power” and their “perceived authority” when it comes to an end of life situation.

Are you dealing with a real or a perceived end of life situation?

And first of all you need to start asking whether you, your family and your critically ill loved one are dealing with a real or a perceived end of life situation.

What do I mean by that?

A real end of life situation means that your critically ill loved one is dying no matter what. No fancy technology, no fancy equipment, no life saving surgery and no other treatment or therapy option is going to save your critically ill loved one’s life, period!

A perceived end of life situation is a situation where the Intensive Care team perceives the end of life for your critically ill loved one as being “in their best interest”.

The perception that the Intensive Care team has that it’s in “the best interest” for your critically ill loved one to pass away is often a direct result of what’s happening [“behind the scenes” in Intensive Care!](#)

It often doesn’t reflect clinical reality and whenever the Intensive Care team hints towards something such as “it’s in the best interest” of your critically ill loved one to [“withdraw treatment” or to “withdraw life support”](#) you need to start digging deeper!

I have seen so many Families over the years in Intensive Care asking for and influencing far too little!

I have therefore seen countless situations where Families of critically ill Patients in Intensive Care have been “sold” on a perceived end of life situation where Intensive Care teams successfully “sell” families of critically ill Patients in Intensive Care on a [“withdrawal of treatment” and/or a “withdrawal of “life support”](#) as being “in the best interest” of their loved one.

It’s extremely sad that 99% of families of critically ill Patients in Intensive Care have no peace of mind, no control, no power and no influence because they don’t

understand that the Intensive Care team almost always bases their decision making, as well as the positioning of your critically ill loved one's prognosis and diagnosis on what's happening [“behind the scenes” in Intensive Care!](#)

It almost always comes down to the fact that the Intensive Care team is positioning your critically ill loved one's prognosis and diagnosis on

- The financial interests(\$\$\$) of the Intensive Care Unit and the hospital, i.e. will the Intensive Care team make money or lose money when continuing treatment on your critically ill loved one
- The bed management issues and the bed management strategies of the Intensive Care Unit, i.e. is the Intensive Care unit currently experiencing a high demand or low demand on their precious, scarce, expensive and “in-demand” Intensive Care beds? Most of the time they are experiencing a huge demand for their ICU beds! It is therefore that you need to carefully listen and also carefully judge the Intensive Care team's positioning of your critically ill loved one's prognosis and diagnosis on the fact that the Intensive Care team is facing huge pressure on their beds and therefore their (limited) resources
- You also need to know and understand that medical research in Intensive Care Units is of massive interest for the Intensive Care team. Therefore your critically ill loved one's prognosis and diagnosis may be presented to you in the light of the fact that the Intensive Care team has a low interest in continuing treatment for your critically ill loved one because they can't enrol your loved one in a medical research study that generally speaking attracts 5,6,7 or even 8 figure Dollar \$\$\$ funding per year
- Also understand that staffing in Intensive Care can be a huge challenge, therefore staffing and other resource limitations can be a huge factor in how the Intensive Care team presents and positions your critically ill loved one's prognosis and diagnosis! Again, limited resources is a contributing factor when the Intensive Care team presents and positions your critically ill loved one's case!

Given that you now have a basic understanding that what's happening [“behind the scenes” in Intensive Care](#) is something you need to not only know and understand,

but you need to master, if you want to quickly get peace of mind, control, power and influence, we can now move on to what you need to do if you are in a real end of life situation!

If you are in a perceived end of life situation you need to check out our section with our [Ebooks, Videos and Audio recordings here](#) in order to get a deeper understanding of what you need to do next!

One of the biggest challenges in Intensive Care is that Families of critically ill Patients leave too much of the decision making up to the Intensive Care team and they have often been bitterly disappointed in how situations, including end of life situations have been handled by the “expert” Intensive Care team.

Therefore, you need to, once again be very clear and be very specific how you and the rest of your Family would like any situation, including an end of life situation to look like!

It could mean that you want your critically ill loved one to go into a quiet side room or into quieter area in the Intensive Care Unit, because you might feel that the area or the bed space that your critically ill loved one occupies might not be the right spot or area for the situation your loved one is in, including an end of life situation.

Specifically, ask if your loved one can be moved into a quieter area. Usually this is something that can be facilitated if you ask for it. If the Intensive Care team says that it can't be facilitated, be persistent and keep asking.

Don't take “no” for an answer and don't be intimidated by the “perceived power” and the “perceived authority” of the Intensive Care team!

Also, keep in mind, your, your Family's and your critically ill loved one's situation is unique! If your critically ill loved one is approaching their end of life in Intensive Care, you want to make sure that you and your Family have as much peace of mind, control, power and influence as possible in this sad and devastating situation, as the memories of the event will stay with you for the rest of your life, irrespective of the outcome!

Therefore you and your Family do not want to have any regrets and you don't want to think about this situation in the future in any way that you could have negotiated a better outcome or a better end of life situation, because those memories will stay with you and your Family forever and you don't want to think

or feel like you have been pushed or rushed into an end of life situation that could have been handled much better.

Therefore, I really urge you to make your wishes known to the Intensive Care team, you can trust me on this one!

And before I go into more detail about how you should handle an end of life situation in Intensive Care, I really urge you to do your own research, to be bold and brave and challenge the Intensive Care teams assumptions and their positioning of your critically ill loved one's prognosis and diagnosis!

I urge you to make sure that you know your critically ill loved one is getting the best possible treatment so that you are not one of the numerous Families that gets "sold" on a ["withdrawal of treatment"](#) or a ["withdrawal of life support"](#) as being in the "best interest" of your critically ill loved one's prognosis and diagnosis!

Intensive Care teams can be extremely shrewd and adept when it comes to "selling" you and your family on what might be "in the best interest" for your critically ill loved one!

Whenever the Intensive Care team is bringing up that a ["withdrawal of treatment"](#) or a ["limitation of treatment"](#) is "in the best interest" for your critically ill loved one, you have to ask whether it's in the "best interest" of the Intensive Care team, due to their numerous conflicting interests!

You should never take anything for "face value" that the Intensive Care team is telling you and you should always, always make up your own mind, no matter the situation!

We offer a wide range of solutions for you and your family here at INTENSIVECAREHOTLINE.COM and we do so by offering [free and paid advice and services, including 1:1 consulting!](#)

Let's now look at end of life situations and how they should be handled!

I have seen many "good" and many "bad" end of life situations in Intensive Care over the years. With "good" end of life situations I mean situations, where there has been enough time to get everybody to agree how a particular end of life situation should be handled.

End of life situations that have been handled well, usually consider that all the important Family members and friends had enough time to say their goodbyes and

usually all the cultural, spiritual, ethical and religious needs of the Patient and the Family had been considered and met as well.

I really do believe that if you can facilitate such a process in a consensual, sensitive, timely, ethical, private and dignified manner, an end of life situations can be a tremendous privilege.

End of life situations can be a privilege if handled well

I really mean it. Whilst it is extremely sad and devastating to lose a precious life, you, your Family's, as well as the Intensive Care team's memories of your critically ill loved one's end of life situation is extremely important for the rest of your life. Those memories stay with you for the rest of your life, just like many end of life situations in Intensive Care stay with me for the rest of my life.

I do remember some very poorly handled end of life situations in Intensive Care and those poorly handled end of life situations stick with me negatively for the rest of my life. Let alone the family.

How bad must they feel, if it leaves a big impact and bad memories on non- Family members like myself?

I have learned from those poorly handled end of life situations and I have come to the conclusion that there are situations where everybody involved in the process can facilitate and improve the end of life process, so that everybody knows and everybody agrees, we have done the best we could have done for your critically ill loved one in Intensive Care!

I strongly believe that a private and dignified death is possible so that you and your Family have peace of mind, control, power and influence.

Therefore it is important that you and your Family have an idea and a clear picture of what that dignified end of life situation for your loved one looks like for you and for your Family and simply ask for it!

Don't underestimate the significance of this "once in a lifetime" situation for you and for your Family, because you will live with the memories of the situation for the rest of your life.

Don't take "No" for an answer from the Intensive Care team and I would think that most Intensive Care units will move "heaven and earth" to facilitate your wishes of a dignified and private death for your loved one.

Also, as a side note, in most first world countries, the majority of people- if given the option- want to die at home.

You should check out www.intensivecareathome.com.au if you think that your loved one want to die at home.

Dealing with the worst case scenario

- 4. Your critically ill loved one may be so unwell and unstable because of the severe nature of their injuries that they are rapidly approaching their end of life and their life may be slipping through the fingers of everyone quickly and they may pass away relatively quickly within few hours or few days.**

Ok, so this is possibly the worst out of all scenarios and the worst situation to be in, because you feel like you have no peace of mind, no control, no power and no influence at all.

The life of your critically ill loved one is slipping through the doctors, the nurses, through your and your Family's hands.

If you are finding yourself in this situation, I do feel your pain and I do feel your despair. You might feel numb and you might feel empty. There are not many more challenging situations that life can throw at you than this one.

Once again, I have seen those situations as well, where all the efforts to save your critically ill loved one's life are in vain and it has a massive impact on your and on your Family's life.

Losing a loved one in such tragic and dramatic circumstances is just simply horrible.

Because I have witnessed and I have been involved in such dramatic and tragic end of life situations, where a precious life literally slips through the fingers of the Intensive Care team, despite all the technology and life support equipment available, it has left deep impacts and imprints on me as well, as I had to find my own coping strategies of dealing with such dramatic circumstances, beyond everyone's control.

If you have lost a loved one in Intensive Care due to critical illness or if you are about to lose a loved one due to critical illness, look at the situation differently and ask yourself, "Is there meaning in this?"

I know you might think I have lost it. But I say this again. “Is there meaning in the death of your loved one?”

I know that whenever I have lost a loved Family member who died, I found out the deeper meaning behind it.

I found that there usually was a lesson that the rest of the Family had to learn from.

They were lessons that were hard to swallow at first and once you have come clear with those lessons you might find meaning in it.

Is there a lesson in the death of your loved one that the rest of your Family needs to understand and learn from? It could be personal as well.

Is there a personal lesson for you?

Dealing with grey areas(Intensive Care is never black and white)

- 5. Your critically ill loved one may show signs of slow recovery and stability and the Intensive Care team thinks that if your critically ill loved one would survive their ordeal in Intensive Care, that they would be permanently disabled with the consequences that your critically ill loved one would have no or very little Quality of Life. This would very likely be a cause of the [severe head injuries](#) and the Intensive Care team expects your critically ill loved one to be permanently and severely disabled with no or very little Quality of Life. Therefore they suggest a [“withdrawal of treatment”](#) might be in the “best interest” of your critically ill loved one to not prolong your loved one’s suffering.**

This is obviously a very difficult and a very challenging situation to be in and you and your Family would likely need time to let this sink in. Your frustrations, your fears, your vulnerability, your struggles, your lack of control, your lack of power and your perceived inability to influence decision making might have reached a new peak in your situation and you feel horrible, lost and out of your comfort zone.

In those situations, time may not be your enemy, because your critically ill loved one is stable and is kept alive on life support with technology. Whilst the situation

is different to the situation, I just described before(4.), your critically ill loved one may still not survive.

You might almost feel like your critically ill loved one's life is in your and in your Family's hands, as your opinion and your point of view in this situation matter big time!

Whilst the Intensive care team has taken a clear stand and they stated an opinion of what they think might be in the "best interest" for your loved one, you may or may not agree on their outlook.

You may feel like, "if I and my Family agree to what the Intensive Care team suggests, are we doing the right thing and is it really "in the best interest" for my critically ill loved one?"

It is an extremely challenging and difficult situation that you and your Family are in and the Intensive Care team might suggest that you should take your time to think about the situation for a day or two and then come to a conclusion.

It is very important that you and your Family don't feel under pressure from the Intensive Care team to make a decision right here and then. You need once again, think clearly about this.

You need to consider what your critically ill loved one would want in such a situation.

You need to consider your own moral, ethical, religious, spiritual and cultural beliefs.

I personally believe that those situations are never black and white and they rarely are.

Sure, your loved one is extremely unwell and the odds are not in their favour. But what if the Intensive Care team keeps trying? What if you get a second opinion from another medical team?

And most importantly, what is happening ["behind the scenes?"](#)

By ["behind the scenes"](#) I mean things like, are there other Patients waiting for precious, scarce, "in-demand" and expensive Intensive Care beds?

Would the Intensive Care Unit use a lot and expensive resources to get your critically ill loved one through their ordeal that would be eating massively into the ICU's annual financial budget?

Or depending on the business model, does the Intensive Care team think that they wouldn't be making any money by continuing to treat your critically ill loved one?

Is the Intensive Care Unit having a staffing crisis? Is the Intensive Care Unit having a negative outlook on things generally? What is driving the culture of the Intensive Care Unit, is it positive or negative?

Is your critically ill loved one's case a case where the Intensive Care team can't practice medical research and have they therefore lost interest in continuing treatment for your critically ill loved one?

If the Intensive Care team is talking about that your loved one wouldn't have any Quality of Life in the future, what do they exactly mean?

What is the individual's ICU team member's point of view and perception about "Quality of Life?"

What is your view about "Quality of Life?" Would you and your Family want your critically ill loved one around if he or she had a disability?

Would you and your Family be able to cope?

What is your view about Quality of end of Life? What is the Intensive Care teams view about Quality of end of life? Do they even know what that means?

I know that these are highly charged ethical and moral questions and topics that can't be answered easily and it is important that you keep asking those questions and get very clear and get very specific what you want in this particular situation.

Furthermore, if your gut and instincts are telling you that a ["withdrawal of treatment"](#) is not the right thing to do for your critically ill loved one then you should listen to your gut and instinct! Your gut and instincts never lie.

If you feel pressured by the hospital and by the Intensive Care team to agree to ["withdraw treatment"](#) you need to ask for the Intensive Care policy about ["withdrawal of treatment"](#).

It is very important that you understand the process and the methods that the Intensive Care unit stands on in this particular situation. This is literally a life and death, as well as a "once in a lifetime" situation and you and your Family should not make a decision lightly, nor should you and your Family make a decision quickly.

If the Intensive Care team is still trying to pressurise you to agree to [“withdraw treatment”](#), the ICU team might argue that they are “happy” to make a decision for you so that you don’t feel burdened by “having to make a decision”.

I have seen many [Family meetings](#) where the Intensive Care team might argue this case and you may or may not agree with their position.

I personally do strongly disagree with the Intensive Care team making a decision about life or death about your critically ill loved one.

I personally believe that the decision should be in a Family’s hand and not in the ICU team’s hand. That’s why it’s so important that you and your Family know what you want and that’s why it’s so important that you are doing your own research!

And besides, I know for a fact that there are just too many things happening [“behind the scenes”](#) in Intensive Care that almost always impact on how the Intensive Care team positions your critically ill loved one’s prognosis and diagnosis, especially if they are trying to “sell” you on a [“withdrawal of treatment”](#) [or a withdrawal of life support”](#) as being “in the best interest” of your critically ill loved one!

Do you have the internal strength to carry on? What would your critically ill loved one want in this particular situation? Only after you and your Family have carefully considered your answers to those questions, only then should you be making a decision.

INSTANT IMPACT # 5

Stick together with the rest of your Family and speak with one voice

This one should be a “no brainer” but once again, I see far too often that Family dynamics play out negatively at the bedside of critically ill Patients in Intensive Care.

If your Family is intact and if your Family dynamics don’t impact negatively in your challenging situation then you can stop reading here. The reason I do mention it however is that I have seen and witnessed far too many situations where Family dynamics impacted negatively on critically ill people.

I am not saying here that you need to pretend that you don't have internal Family issues, because most Families have them and the Intensive Care team will eventually find out anyway.

Especially during times of crisis, the Family dynamics and Family issues might play out negatively in a situation where the well being and the best interest of your critically ill loved one needs to be everybody's focus.

Related link:

[“THE 5 THINGS FAMILIES DO WHO HAVE PEACE OF MIND, ARE IN CONTROL, FEEL POWERFUL, AND INFLUENCE DECISION MAKING FAST, WHILST YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE!”](#)

A time of crisis might actually be the time where you and the rest of your Family might come together and lay your issues at rest and make sure that your critically ill loved one gets the attention and the support they really need and deserve in this unique situation.

However, what I have seen over and over again over the years when dealing with Families of critically ill Patients at the bedside in Intensive Care is, that Family dynamics play out negatively and the person who needs their Family the most in this difficult and challenging situation, which is your critically ill loved one, suffers the most and they don't need or deserve any of that.

Keep in mind that your, your Family's and your critically ill loved one's situation is difficult, challenging and unique already and on top of your fears, your frustrations and your struggles dealing with the adversity of your critically ill loved one's situation, you don't need any additional drama on top!

Who is next of kin in this situation?

For example, if your loved one is living in a de-facto relationship and also has children from a previous relationship, it often turns out that the de-facto partner wants to be Next of Kin (NOK) for your critically ill loved one.

Some of the children might however challenge the NOK status and they might say that the de-facto partner may not have your critically ill loved one's best interest at

heart and doesn't know your critically ill loved one well enough to know and understand what they would want in such a difficult situation.

So therefore one of the children might say that they want to be NOK and I have, once again, seen those situations over and over again, where Patients relatives or de-facto partners fight over the NOK status.

This of course, doesn't help your critically ill loved one's situation.

Why is the Next of kinship important?

To have a NOK is important because your critically ill loved one in Intensive Care is in a situation where they might require medical consent for surgical or other procedures, such as Tracheostomy, Central line insertion, Arterial line insertion, blood transfusions, Intubation and a whole range of other things, where the Family or the NOK need to give written consent.

And there should only be one person giving written consent. Keep in mind that your critically ill loved one in Intensive Care is most likely not in a position to make decisions or sign legal documents, because that is exactly what a consent form is.

From a health professional perspective, it is hard and difficult to deal with such dynamics and the sooner your Family comes to an agreement who is going to make decisions and also who is the spokesperson, the better and the easier the situation gets for all parties involved.

Another example where the [unity of your family](#) is important is in end of life situations and in end of life decisions and I have seen over and over again that when it comes to end of life situations, where, for example the medical staff is suggesting to "[withdraw treatment](#)" on your critically ill loved one and you and your Family are unclear what your wishes are and if you are unclear what your critically ill loved one's wishes would be in this particular situation, it can get very messy.

The situation is probably dramatic already, just by having your critically ill loved one in Intensive Care and you and your Family don't need any additional drama.

So, in order to get your house in order, make sure that you and your Family lay any issues at rest, at least whilst your loved one is critically ill in Intensive Care, make sure you elect a spokesperson and a NOK that everybody is happy with and once

again, having a clear cut situation helps you to deal with the Intensive Care team as well.

Furthermore, you and your Family will have more peace of mind, more control, more power and more influence because you are acting as a united front.

It is so much easier for you and for your Family to challenge the Intensive Care team, to have influence, to have control and to have power if you [are speaking with one voice](#) and if you have one spokesperson and one dedicated NOK.

Summary

I want quickly summarize of what you have learned in this report and I also encourage you to put what you have learned into action immediately.

- Focus on what you can control and don't worry too much about what you can't control
- Acknowledge your fears, frustrations, your struggles and your vulnerability
- Face reality as it is
- Learn how to quickly control your emotions
- Do not put the Intensive Care team on a pedestal
- Know what you want and be crystal clear about it
- Keep asking lots of questions and quickly learn what's happening ["behind the scenes"](#) in Intensive Care and how it impacts on your critically ill loved one
- Don't be afraid to speak up!
- No matter what, stay positive!
- If you are dealing with the worst case scenario try and find meaning in it
- Intensive Care is never black and white
- [Stick together with the rest of your Family and speak with one voice](#)
- Make use of INTENSIVECAREHOTLINE.COM's website and its [FREE](#) and [paid resources](#) and read our other reports or watch our videos

I really hope that this “INSTANT IMPACT” report has served you well as a starting point and I really hope that I was able to give you some instant strategies as a starting point.


Do not forget that controlling the things that you can control in this challenging and difficult situation will set you apart from most other Families of critically ill Patients in Intensive Care and the Intensive Care team will notice that, because they can see that you are different, compared to other Families!

I also hope that I will see you in one of our [other reports or videos](#) and/or in our [1:1 consulting via Skype or over the phone](#) so that you can find even more strength, more power, more energy and greater influence, in your challenging journey through the Intensive Care landscape.

Also, please send your questions to support@intensivecarehotline.com or call us on

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Sincerely, your friend

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- [Ebooks, Videos and Audio recordings](#)
- [1:1 consulting via Skype or over the phone](#)

Here are other Ebooks, Videos and Audio recordings that will help you to get peace of mind, control, power and influence fast!

- **[“THE FAST LANE FOR PEACE OF MIND, CONTROL, POWER AND INFLUENCE WHEN YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE!”](#)**

This is our ultimate guide for families of critically ill Patients in Intensive Care that comes with 14 Ebooks, 21 Videos and 21 Audio recordings as well as with 1:1 consulting.

Here you'll discover everything you need to know about Intensive Care FAST when your loved one is critically ill in Intensive Care!

You'll get **PEACE OF MIND**, control, power and influence FAST!

This COMPREHENSIVE and “tell-all” program with Ebooks, Videos and audio recordings also comes with ONE on ONE consulting with me personally via Skype or phone! You'll also get unlimited email support!

Other Ebooks, Videos and Audio recordings that you may be interested in are (click on the links)

- **[THE 7 ANSWERS TO THE MOST FREQUENTLY ASKED QUESTIONS IF YOUR LOVED ONE IS A CRITICALLY ILL PATIENT IN INTENSIVE CARE](#)**
- **[THE 7 QUESTIONS YOU NEED TO ASK THE MOST SENIOR DOCTOR/PHYSICIAN/ CONSULTANT IN INTENSIVE CARE IF YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE THAT DIRECTLY GIVES YOU PEACE OF MIND, CONTROL, POWER AND INFLUENCE REAL FAST!](#)**
- **[THE ULTIMATE 6 STEP GUIDE FOR *FAMILY MEETINGS WITH THE INTENSIVE CARE TEAM*, THAT GETS YOU TO HAVE PEACE OF MIND, CONTROL, POWER AND INFLUENCE REALLY FAST, WHILST YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE!](#)**

- FOLLOW THIS PROVEN 5 STEP SYSTEM SO THAT YOU CAN LET GO AND MANAGE YOUR AND YOUR FAMILY'S FEARS, FRUSTRATIONS, STRUGGLES AND ANXIETIES FAST, WHILST YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE SO THAT YOU CAN HAVE PEACE OF MIND, CONTROL, POWER AND INFLUENCE FAST!
- FOLLOW THIS PROVEN 6 STEP SYSTEM TO GET PEACE OF MIND, CONTROL, POWER AND INFLUENCE FAST, IF YOUR CRITICALLY ILL LOVED ONE IS A LONG-TERM PATIENT IN INTENSIVE CARE OR IS FACING TREATMENT LIMITATIONS IN INTENSIVE CARE!
- THE 5 THINGS YOU NEED TO KNOW IF THE MEDICAL TEAM IN INTENSIVE CARE WANTS TO "LIMIT TREATMENT", WANTS TO "WITHDRAW TREATMENT" OR "WITHDRAW LIFE SUPPORT" OR WANTS TO ISSUE A "DNR" (DO NOT RESUSCITATE) OR AN "NFR" (NOT FOR RESUSCITATION) ORDER FOR YOUR CRITICALLY ILL LOVED ONE!
- AVOID THE 3 MOST DANGEROUS MISTAKES YOU ARE MAKING, BUT YOU ARE UNAWARE OF, WHILST YOUR LOVED ONE IS A CRITICALLY ILL PATIENT IN INTENSIVE CARE! AVOID THESE 3 MISTAKES AND YOU CAN EXERCISE CONTROL, POWER AND INFLUENCE FAST!
- AVOID THE 3 MOST DANGEROUS MISTAKES YOU ARE MAKING BUT YOU ARE UNAWARE OF, IF YOUR LOVED ONE REQUIRES LONG-TERM VENTILATION WITH TRACHEOSTOMY IN INTENSIVE CARE!
- THE 7 ANSWERS TO THE 7 MOST FREQUENTLY ASKED QUESTIONS IF YOUR LOVED ONE REQUIRES ONGOING MECHANICAL VENTILATION WITH TRACHEOSTOMY IN INTENSIVE CARE!
- THE 10 THINGS YOU DIDN'T KNOW ABOUT SEVERE HEAD OR BRAIN INJURIES (INCLUDING TRAUMATIC BRAIN INJURY AND STROKE) IN INTENSIVE CARE THAT YOU MUST KNOW, ESPECIALLY IF YOUR CRITICALLY ILL LOVED ONE ISN'T WAKING UP!
- THE 10 THINGS YOU DIDN'T KNOW ARE HAPPENING BEHIND THE SCENES IN INTENSIVE CARE THAT HOLD YOU BACK

FROM HAVING PEACE OF MIND, CONTROL, POWER AND INFLUENCE, WHILST YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE!

- **THE 10 THINGS YOU DIDN'T KNOW DOCTORS AND NURSES ARE TALKING ABOUT WHEN YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE, WHEN YOU AND YOUR FAMILY ARE NOT PRESENT AT THE BEDSIDE!**
- **THE 5 THINGS FAMILIES DO WHO HAVE PEACE OF MIND, ARE IN CONTROL, FEEL POWERFUL, AND INFLUENCE DECISION MAKING FAST, WHILST YOUR LOVED ONE IS CRITICALLY ILL IN INTENSIVE CARE!**
- **THE 9 MYTHS OF BEING A CRITICALLY ILL PATIENT IN INTENSIVE CARE!**

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