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The recent uproar over the health care bills being crafted by various senators and congressmen evoked a poignant memory for me; the circumstances of my father's death. Those circumstances are an eloquent testimony as to why it is extremely important for every person to address how he or she wishes to be treated should they enter a state in which they are near death and are unable to communicate with their doctor. This would mean they could neither ask for nor decline the taking of extreme measures aimed at keeping them alive. I believe it has become evident that this is the situation that is broached in some of the bills on health care crafted in Congress and that the discussion of such matters is not an attempt to put anyone to death. It is a subject that every person should think about and address so that, should a dire situation like a coma occur, their wishes for treatment will be readily known.

In 1994 I received a call from my sister who lives in El Paso. That is where I grew up and where my parents lived. By 1994 Mom and Dad had moved into the assisted living facility of a residence owned and managed by a national firm. Dad had been slipping physically and mentally for several months. I had gone to El Paso several times to help them get settled in that assisted living facility. My sister's call told me Dad had gone into a coma. I flew to El Paso the next day.

I went into the living room of my parents' residence and found my father on a bed, unshaven, unkempt and unconscious. I leaned over him and told him I was there. His eyes did not open but, marvelously, he smiled. That was our last communication.

A nurse came into the room and informed me that my father would be kept on that bed, she would swab his mouth with a cue-tip once an hour and that would be the extent of his care. My Mom, by this time, was incapable of grasping what had happened. Thank goodness I had a dear friend and Air Force Academy classmate, who is a physician. I called him and he confirmed that I could tell that nursing home what would be done; not vice-versa.

The following day we transferred Dad to Providence Hospital in El Paso. I will always remember going into his room. Unlike the nursing home it was bright, cheery and clean. Dad had been bathed, shaved and dressed in clean pajamas. He had an IV that was giving him fluids to keep him hydrated. He did not recognize or react to anyone but he looked totally peaceful. And a couple of days later he died.

I have, ever since then, been so thankful that I took the steps to move Dad to that hospital. It was from this experience that I discovered the importance of taking the time and effort to think through just what actions you would want your family to take you should become incapacitated. For sure you want an IV keeping you hydrated rather than some nursing home saving money by swabbing out your mouth with a cue-tip. And then you may want measures taken to try to resuscitate you; measures whose cost you arrange to be paid. Or you may wish to be kept comfortable and to pass peacefully. It is your choice and it is important that you make it known.

It is also important that we all understand that this is a course of action that can carry out your wishes, leave your family emotionally comfortable and have significant control over medical expenses. This is what the bills in congress wish to address. They are your choices and definitely not some dictated outcome.