

## Scenario – 11 - a well-oxygenated death.

You are 85, living at home with a daughter who has come to stay for the duration of the epidemic. You are fit for your age, apart from slightly raised blood pressure and mild obesity. You used to be a district nurse and your daughter is a recently retired headmistress. She has left her husband to fend for himself.

Early on in the epidemic, your GP, with whom you get on very well, phoned about how you would wish to be cared for if you became severely affected by Covid-19. You talked through the options and he gave you his best guess on your likelihood of surviving ventilation should you be admitted to hospital. You also discussed in detail what would be available if you chose to stay at home and how you could access it when required. He told you that the local GP practices had set up a 24-hour rota for providing care for those who had made a considered decision to stay at home. One of them would come and visit to assess what was needed during the first phase of the illness in preparation for possible progression to the severe stage. Drugs and oxygen would be left at your house and any carers would be trained on using the oxygen and giving medication. You discussed all this with your daughter and between you decided that you would rather spend your last days with her at home, even though there was a small increased chance of survival if you went to hospital.

When the second wave of the epidemic took hold, somehow the virus got into the house and you and your daughter both went down with it. She was fairly mildly affected and managed to keep going and look after you both. She contacted your GP and he arranged a test to be done at home. When it came back positive the next day, he visited with the oxygen and drugs as promised and trained your daughter how to administer the oxygen and give the injections of the drugs. He also left instructions about dosage and what to expect. He said to phone the Covid emergency team number if you became distressed in any way before starting the oxygen or drugs. After rallying on day 7, you took a turn for the worse, becoming increasingly breathless, and on the evening of day 9, phoned the emergency number.

A doctor called within the hour and, fully protected, examined you and checked your blood oxygen level. He set up the oxygen, delivered through a mask, and after 10 minutes rechecked your blood oxygen. It had responded well and you felt less breathless. He said to continue with the oxygen at that level and if the breathlessness increased, it could be turned up gradually to a maximum. He also gave you two injections and said that after an hour you could try reducing the oxygen to see how you felt, and even stop it altogether if the drugs were sufficient to keep you comfortable.

You felt comfortable and cared for. You stayed on the oxygen all night and got some sleep. In the morning a nurse came and checked you over. She stopped the oxygen and found that it was not making much difference to your blood oxygen, but the drugs were making you quite relaxed and the breathlessness was no longer a problem. Over the next two days, you managed to talk to your son and grandchildren several times and your daughter was with you throughout. You overheard that your daughter was adjusting the drugs after discussing with a doctor from the team as you drifted in and out of consciousness. You felt loved and supported and thought what a wonderful life you had had and how much you had loved and been loved. Peacefully, you passed away.