TER INLEIDING

prepare a place for you, I wil come again, and receive you unto Myself; that where I am, there ye may be also. John 14:2,3

4. What if the patient asks, "Why does God do this to me?"

Remember that our great God has a master plan and nothing happens by chance. David said, Before I was afflicted I went astray; but now have I kept Thy word. Psalm 119 : 67

Job was tested and came through victoriously to the glory of God.

Paul said of his infirmities, Most gladly will I rather glory in my infirmities, that the power of Christ may rest upon me. 2 Corinthians 12:9

The force of your testimony through illness may be a real blessing to those around you.

There hath no temptation taken you but such as in common to man: but God is faithful, who will not suffer you to be tempted above that ye are able; but will with the temptation also make a way to escape, that ye may be able to bear it. 1 Corinthians 10 : 13

5. Is it best to tell a child he is dying?

No. It is the practice in pediatrics never to tell the pediatric patient that he is going to die. A child does not comprehend death and often becomes frightened if you explain in terms he does not understand. However, this does not mean that the Gospel cannot be presented. Most important, a child can readily speak of Jesus and Heaven without associating them with pain, death, and separation from parents.

The Scripture verses in the above discussion are quoted to start your train of thought; further Bible study will show you that they are by no means the only passages which deal with the topics.

C. The Relatives.

A most important aspect of management of the relatives is how to tell them that their loved one has a fatal illness. A primary rule is that the diagnosis should not even be mentioned untill all the preliminaries and diagnostic procedures are finished. Do no allow the relatives to know your thoughts and plans. Is does not help them to worry about several serious differential diagnoses rather than one even fatal possibility.

When you are ready to discuss the diagnosis and the future plans, call the important family members together in a quiet private place where everyone can be seated. A convenient telephone and a box of Kleenex might be of help in making the minutes after your discussion pass smoothly.

Explain the tests very briefly by saying, "It is our opinion on the basis of our study that your child (parent, etc.) has (whatever the disease may be)." Then wait and answer the questions with simple "yes", "no", "we cannot predict" answers.

The patient's relatives do not tolerate a long discussion at first. The emotional response does not always come at once and often their minds