

No Transfer Order

“William, you’ve had a sequence of atrial fibrillations and congestive heart failure episodes. Much of the shortness of breath and confusion you are experiencing is due to insufficient oxygen to the brain and fluid build-up that makes your heart work harder. We’re treating you with bottled oxygen and diuretics. You’ll feel better soon,” the doctor said.

“I can’t get comfortable in any position. I don’t sleep,” William responded, barely audible. “I don’t want to live.”

“We’ll give you something for anxiety to help you relax and rest, not to worry,” Dr. Earle said.

“I feel disorientated,” William said, blinking in confused exhaustion. “I’m so tired.”

“Your long-term memory is operational, so recalling events from childhood may be much easier than trying to remember what you just ate for lunch,” the doctor told him. “After a good meal and a good night’s sleep, you’ll be much improved.”

“Dad, let’s get you settled into your hospital room,” Caroline said. “I’ll stay with you through dinner and until you fall asleep comfortably. How does that sound?”

“You’re wonderful, Caroline, so wonderful,” he whispered, looking down vaguely at the floor from his wheelchair in the doctor’s office.

“Thank you, Dr. Earle,” she said, as she pushed her father from the examination room. “I’ll be in touch with any changes, plus or minus, from the hospital.”

“Please do. William is not in crisis, but monitoring him over the next couple of days in the hospital is the best thing,” he replied.

Overnight, however, William hadn’t slept well.

“Please, just leave me be,” he told the frequent medical staff visiting his room.

“This will only take a minute, William,” a surly nurse said, “doctor’s orders.” The nurse and techs were constantly taking his vitals, checking IV bags, catheterizing to void urine, adjusting oxygen tubes in his nose that fit too snugly behind his ears, administering pills, and interrupting rest for unwanted drinks and snacks.

At his hospital room the next morning, Caroline saw deep bags under her father’s blurry eyes. His unkempt white hair indicated he hadn’t been groomed, and he was either oblivious to it or couldn’t care less. “Dad, let’s wash your face and comb your hair,” she suggested.

He didn’t respond to her question, and hadn’t acknowledged her presence. Concerned, she took his hand in hers. He looked up absently.

“Dad, I asked if you would like to wash up and comb your hair,” she repeated. He cocked an ear towards her and cupped his other hand around the ear.

“What did you say?”

She determined that he had a dead hearing aide battery. Rather than repeating her query again, Caroline said, “I’ll be right back.” She went into his bathroom and prepared a washcloth with warm water and a dab of body wash, then returned to his chair by the bed.

“Let’s clean you up a bit,” she said, as she gently wiped his forehead, then his closed eyes, cheeks, and chin. “Doesn’t that feel refreshing?” she asked. Putting his bifocals back on, he frowned under bushy white eyebrows.

“Have you had breakfast yet?” she asked. “Hospitals usually serve an early breakfast.”

“I feel terrible,” he said, in a low voice.

“Dad, I’m here now, so take it easy. I’ll help you with anything you need. Are you hungry?” Caroline asked.

Blinking and nodding off, he didn’t answer. Caroline left the room to go to the nurses’ station.

“Did my father, William Marshall, in Room 311, eat this morning?” she asked.

“All of the patients in our unit were served breakfast over two hours ago,” a courteous duty nurse replied. “The trays were delivered between 7:00 and 7:30 this morning, and cleared away by 8:30.” Caroline glanced at her watch. It was half past nine o’clock.

“Thank you. Another thing, did someone help my father from bed to the recliner? I hope so, because he’s subject to falling,” Caroline said.

“I don’t know. Let me call your father’s nurse,” the duty nurse replied. “Everything’s alright there, isn’t it?” she asked.

“Well, his hair was uncombed, and he has deep bags under his eyes. It doesn’t appear he got any sleep,” Caroline said. Her father’s day shift nurse walked up and smiled.

“You must be William’s daughter,” she said. “Nice to meet you. I’m Becky.”

“Yes, I’m Caroline. Did my father sleep last night and did he eat breakfast this morning?” she asked directly.

“During reports, the night nurse said he was awake each time she checked on him. She said she asked him if he wanted a snack or sleeping tablet, but he didn’t respond so she didn’t give him food or anything for insomnia. She took his vitals three times, all of which were within the normal range for his age and condition. I assumed he ate breakfast. The night nurse and I were in reports when the food trays were delivered,” Becky explained.

“I’m not sure if he knows where he is, or even if he recognizes me,” Caroline said. “One of his hearing aide batteries is dead, so I’ll get a replacement for that today.”

“I’d be happy to walk with you to your father’s room and see how’s he’s doing,” Becky said.

“Yes, thank you,” Caroline replied, as they turned and walked silently to his room. Upon entering, they saw William awake, sitting in the recliner in its upright position, and staring at the floor.

“William,” Becky called in a firm voice. “Look who’s here to see you.” No response.

Becky went to his chair and knelt down to view his face. She repeated what she had just said in a gentle voice, but one in which he could hear and see her lips move.

“Whose daughter?” he asked.

“Your daughter,” the nurse said. “Here she is. William, what is your daughter’s name?”

“My daughter?” he asked, bewildered. Caroline muffled a sob.

* * *

Twenty years ago, a quadruple bypass had given William a new lease on life in retirement. After working as an electrical engineer for thirty-two years at General Electric, he took the company’s golden parachute offer at the age of 63 and never looked back. Following the successful surgery, he exercised regularly by walking briskly on the suburban road’s sidewalk over three miles daily, past the former dairy farm whose barn was converted into boutiques to the Target store and back. He changed his diet from red meat to fish and chicken, with lots of pulses, steamed vegetables, and brown rice. He took up computing as a hobby to read the *NY Times*, keep financial and tax records organized, and email friends and family. He ironed his shirts and did the grocery shopping at Schnuck’s Market.

With his GE pension, veterans’ disability benefits for an arm injury suffered from a Panzer tank shell fragment in World War II, Social Security, and some inheritance from his wife’s great aunt, plus Esther’s own pension and Social Security benefits, they were secure financially. Esther, who was five years younger and enjoyed good health, continued working for eight years beyond his retirement. Upon her departure from teaching primary school, they continued living in the family’s one-story ranch home after William’s heart surgery until their upper eighties. None of the three adult children, Caroline, Jack, and Rory, lived within a thousand miles for several decades, due to jobs.

“I don’t care what the kids say, I’m not going anywhere,” Esther insisted.

“I don’t necessarily like giving up the car and moving into a retirement home either, Esther,” William consoled. “But, intellectually, I think that time is coming.”

“Not for me, it’s not!” she shot back. “And I’ll drive anywhere, anytime I want to.”

“Esther, what if you got into a bad accident and killed someone. Just like your father almost did when he was your age. The result was he crashed into a telephone pole and was killed. No one wants that for you, and certainly not for other innocent persons,” he said.

“You do what you want. I’m staying here,” she said. William let the conversation lapse.

A couple of weeks later, their adult children with their families came for a Thanksgiving holiday visit. Jack, his wife, and their two girls stayed at the family home. Caroline and her two kids, and Rory with his wife and son, stayed at the nearby La Quinta. At the celebratory meal, Esther announced, “I hear you’re talking about taking our car keys and planting us in an old folks’ home. I’m going on record here and now. I’ll have none of it.”

“Mom, no one’s forcing you to give up your car or move you from home,” Caroline said. “We’re just asking you and Dad to consider it, for your own ease, comfort, and safety.”

“Esther, let’s enjoy this nice meal,” William said.

“We’d never take any such action without your agreement, Mom,” Rory said. “It’s just that the upkeep on this house and the car might be too much for you and Dad to manage now.”

“I don’t want to talk about it. Pass me those beets,” she said.

After dinner, Caroline brought the elephant back into the living room. “All of your neighborhood friends have either moved or died. At a retirement village, there would be lots of opportunity to make new friends. And no more cooking and cleaning, Mom.”

“Who wants coffee?” Esther responded.

“Esther, let’s at least hear them out,” William said.

Caroline continued, “I’ve asked Parksen Hough, whom I know you both respect as your long-term minister at St. Aidan’s church, about the best retirement communities. He heard that Whispering Hills is excellent. How about visiting there tomorrow? We can eat lunch and see how you like the food and atmosphere.”

“You take Dad with you. I’m perfectly happy eating leftovers here at home,” her mom replied.

“It can’t hurt to have a meal at Whispering Hills, Esther,” William said. His wife stood and left the living room. She came back with a tray of mugs, coffee flask, cream, sugar, spoons, and napkins, as if the conversation had never occurred.

Several weeks later William was found feverish and delirious while sitting on the commode at home. He was delivered by ambulance to St. Steven’s Hospital Emergency Room. Rory flew in to comfort both parents during the hospitalization. Medical staff treated William for a urinary tract infection, and performed other cardiovascular tests.

“You scared me, mister!” Esther said. Only then did she agree to go with Rory to visit several retirement homes.

Over the next two months, Jack, Caroline, and Rory telephoned them to continue conversation about moving from the family home. In time, reassured by retaining their vacant, fully furnished house, William and Esther consented grudgingly. They settled into a comfortable two-bedroom suite at the retirement home.

“Keep secret that our paid-for house is my ‘ace in the hole’ after your father dies,” Esther commanded her children privately. “I’m going back then.”

“Moving to Whispering Hills is only a trial run, Mom,” Caroline said. “Give it several months. If you and Dad don’t like it, I’ll personally move you back there.”

They made new friends on their floor and at the dining table. Esther became a well liked “floor captain.” William enjoyed computing on a new computer and going to the exercise room. They attended most of the social events, including lectures, musical performances, picnics, outings to the mall, and special holiday parties.

“We really like Whispering Hills,” Esther said, during the Christmas season family visit.

“Yes, we should have moved here years ago,” William added.

“We’re so happy that things have worked out so well,” everyone echoed.

For the first year at the retirement village, William insisted on keeping home insurance, as well as car insurance. Driving through ice and snow, he made daily visits to collect mail from the family home’s curbside mailbox. Finally, Caroline convinced her mother to sell the house, for her father’s sake. Although still reluctant, both William and Esther acquiesced. Caroline and Rory spent an intense week preparing the house for sale, de-cluttering, painting, landscaping, and blacktopping the driveway. The home sold in its first week on the market.

At the next Thanksgiving gathering, Caroline spoke individually to her dad.

“Have you and mom changed your feelings about giving up driving?”

“No,” he said.

“We’re all terribly concerned that you or mom might have a serious car crash. You could be killed, and someone else out there could die, too. It would be a nightmare,” she said. “Dad, I know you don’t wish to give up the freedom of driving, but think about the dire consequences of a bad accident.”

“As you say, I don’t want to hand over my car keys. But, in my mind, I know it may be the right thing to do,” he said.

“Then you’ll consider it and talk to mom?” she asked. “Dad, we’d like to move ahead with this as soon as possible before someone is maimed or killed.”

“Okay, we’ll talk, but know that I’m for keeping the car for now,” he said.

“At Whispering Hills, they have scheduled transport service to nearby grocery and drug stores, doctors’ appointments, cinemas, and other outings. We can arrange for taxi service whenever you need or want to go anywhere,” she said.

Three months later, the driving issue came to a head.

“I see. I’m the bad guy here,” Esther barked.

“No one said that,” William said. “The kids are concerned about our wellbeing and safety, and that of others on the roadways. I don’t want to give up driving, Esther, but I agree with them. It’s time we handed over the car keys. Deep in your heart, you know it’s time.”

“Mom and Dad,” Rory said, “we’ll be sure you have taxi service to go to church, hair appointments, shopping, or anywhere else you’d like to go. It’ll be like *‘Driving Miss Daisy’* having your own chauffeurs take you anywhere you please.”

“I can see I’m outnumbered,” she said. “My husband says it’s the right thing to do. He’s always been smart. I don’t know a more intelligent man. So, I’ll give in, but I don’t like it, not one bit.”

“Me either, but I’ll go along,” William said. Reaching into his pocket, he pulled out a key ring and started removing the car keys. “Esther, go get your handbag.”

“It’s a difficult decision,” Jack said. “Thank you. We’re all so relieved for everyone’s sake, especially yours, for safety and peace of mind.” Jack had teenage age daughters, so the family decided to give the low mileage 1998 Avalon to him. William signed the title over to him.

During their second year, Esther declined being re-nominated floor captain, saying she was just too busy with her flurry of activities like organizing parties, outings to farmers’ markets or dinner theatre plays, and overseeing nominations and elections for floor captain, secretary, and “game” warden.

“Write it down!” she told William and her friends. She had always believed in making lists to organize her time and check off accomplished tasks. William noticed she was using more and more lists, but surprisingly she had continued dropping social activities she’d welcomed previously.

“I’m pooped. Going to lie down for a bit,” she said to William almost daily now. He noticed that some days, she wouldn’t get up for breakfast and would still be in a nightgown and robe at lunchtime.

On a visit, Fred, a hall neighbor and close friend of William’s and Esther’s, took Jack’s arm, and said, “Jack, look after your mom, she’s not doing too well.”

“How do you mean, Fred?” Jack asked.

“She has not been joining William downstairs for lunch or dinner. She’s opted out of most of the social activities she used to enjoy. I found her alone in a hallway by the music room earlier this week. She didn’t know where she was. I walked her back to her apartment.”

“Does Dad know?” Jack said.

“Yes, I told him and asked him to have her checked out by a doctor. I don’t know if they’ve done that, but you, Caroline, and Rory needed to know. Keep an eye on her.”

During the next holiday’s get together at Whispering Hills, the family was taking photos and catching up on lives. Esther was seated on a sofa in the middle of the joyful hubbub. She closed her eyes, dosing off. About 45 minutes later, it was time to migrate to a reserved table for the Marshall family in the dining hall.

“Mom, rise and shine,” Rory said. Esther didn’t respond. “She’s sleeping deeply,” he said, as he touched her shoulder. No reaction. Alarmed, he knelt down and clutched her by both shoulders and shook gently. The air drained from the apartment’s living room. Silence.

“Mom, wake up. It’s me, Rory,” he said. “She’s out cold!”

“Check her breathing and pulse, quick!” Caroline said. Rory detected she was still breathing, but with a low, weak pulse. She remained unconscious.

“I’ll call the desk and 911,” Jack said. Paramedics arrived within 10 minutes and took her on a gurney to a waiting ambulance for the emergency room.

“Where are my meds?” William asked, before leaving with Caroline enroute to the hospital. Caroline searched his bathroom, then his desk, and on top of the bureau in his bedroom.

“I can’t find them, Dad, where do you normally keep them?” she asked.

“On top of the bureau in one of those plastic pill organizers,” he said. “I checked, but it’s not there.”

“We’ll find them later, Dad. Let me get a set of clean clothes for mom from her bedroom for the hospital. Then we need to go,” she said. In Esther’s bedroom, she found her father’s pillbox placed neatly on her mother’s desk.

“I found your pills. You must have left them on mom’s desk,” she said.

“What, that can’t be,” William said. “I never put my meds in Esther’s room. Let me see it.” He looked and frowned. “Some of my heart medicines are missing.”

“Are you sure you didn’t already take them earlier today?” she asked.

“No, I never take them before lunch,” he said.

“You don’t think she took your medicines, do you, Dad?” Caroline shouted. “I’ll call the ER to let them know it’s possible that she took some of your pills mistakenly.”

Esther recovered from swallowing William’s heart pills. Another year passed, and the family gathered for the patriarch’s birthday.

“We’re here today to celebrate William Marshall’s 90th birthday,” Caroline said to an appreciative audience of some sixty people gathered at the Whispering Hills Retirement Village’s room for special occasions. “My brothers and I will make some comments of appreciation to our

dad. Then, we invite any of you who wish to share an anecdote about him to please do so. We'll have cake and punch, of course, and lots of fun. Thanks for coming.”

Esther was at William's side. Her hair looked stylish and she wore a fashionable, two-piece navy blue suit with a contrasting pink-orange scarf around her neck. She smiled at her husband in admiration and love. She ate a piece of birthday cake with ice cream.

“Wasn't that a great birthday party,” Jack said, later that night. “Dad, you really seemed to enjoy yourself blowing out all those candles, with the help of lots of friends and family!”

“Whose birthday?” Esther asked.

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“William, Caroline tells me that you and your family are discussing a ‘no transfer order’,” Dr. Earle said. Family cannot elect or direct other family members to authorize a ‘no transfer order’. It is only legally valid from a doctor, whom you know and willingly agree to such an order.”

“Yes, I understand,” William replied, “but in what specific circumstances does the order apply, and under other circumstances does it not apply?”

“Excellent questions,” his doctor said. “Let's use some examples. For instance, should you suffer a life-threatening cardiac arrest, massive stroke, or stop breathing, the Whispering Hills staff would not send you to the hospital emergency room for resuscitation. Instead, they would attend and monitor you at bedside, keeping you as comfortable as possible, and call Caroline immediately. Nature would then run its course, with the distinct possibility that you would die. With me so far?”

“Yes, go on,” William said.

“Now, in the case of one of your bladder infections with a fever or a fracture from an accidental fall, those conditions are serious but not immediately life threatening. These can and would be first treated at Whispering Hills, then as directed by me or other physicians you would be taken to the emergency room subsequently for evaluation and treatment. In any case, it is not the

family who make the determination. I would decide, based on the medical event at hand. Of course, I would apprise Caroline and your sons of the situation and basis of any ‘no transfer order’ decision I make for you. I would listen to their questions and concerns in deciding the ultimate course at end of life,” the doctor said, and paused.

“Dad, we know this is a difficult and maybe frightening topic of conversation. Are you OK?” Caroline asked.

“No one, including me, wants to die. Nobody wants to suffer either, or deplete life savings keeping alive artificially. If possible, I’d rather not suffer a prolonged, agonizing death. I’d rather you kids have any money left in our estate than liquidating it to pay hospital bills to keep a vegetable alive,” he said. “I’m near the finish line, I feel it. Not much charge left in my life’s battery.”

“Take some time to consider the ‘no transfer order’, William,” the doctor said.

“No, I’m ready with my decision. The ‘no transfer order’ makes sense to me.”

“Well, if you have second thoughts, all you have to do is telephone me at any time, and we can rescind the order, or talk it out, whatever you want,” Dr. Earle commented.

“Thanks, Doctor, but my mind’s made up. Go ahead with the order,” he said. “I’ve been somewhat scared of dying all my life. But somehow, now it’s not as frightening as it used to be. It’s still not my preference, mind you, but maybe I’m more accepting of the fact.”

“Alright, William, my staff will draw up the order for my signature. We will make Whispering Hills aware of the order as soon as it is prepared. We’ll provide a copy to them, and, of course, to you and Caroline, and anyone else you would like,” the doctor said.

“Caroline,” her father said, “I want you to know I think this thing will ease my mind, but more importantly, it will allow me to help you, Jack, and Rory one last time. That feels good to me.”

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Losses and misery, he thought to himself, as he gazed at the thermostat on the wall across the room.

“I’ve lost so much—my wife, Esther, for starters,” he groaned to the empty wall. They had just “celebrated” their 70th wedding anniversary with cupcakes at lunch. Beginning five years ago, however, Esther’s mentality declined in her advancing dementia. Its ravages had rendered William unrecognizable to her in the last two months. That was bad enough, but then he lost her again physically when she transferred to a cognitive care unit from their shared two-bedroom unit in the assisted living quarters.

“We were like cranes mated for life. Now the nest is drab and empty. I’m so lonely,” he said, through eyes brimming with tears. His head dropped to his chest and he sobbed quietly to no one there.

“I can’t see to use the computer anymore. I forget how to turn it on, how to open email, or do a crossword puzzle,” he lamented to himself. Computing had been his favorite pastime, for news, crossroads, and reading. Then his deteriorating eyesight made reading a chore, and he found it confusing and frustrating. He stopped computing. William even all but quit watching television.

“Didn’t I use to like going for my daily forty-minute Nu-Step workout in the exercise room?” he asked himself. “With this dizziness and fatigue, I can’t do that anymore.” He quit exercising.

“It seems like I looked forward to good food service in the Whispering Hills dining room, and to having conversation with others there,” he said. “But with most of my teeth and sense of taste gone, I’ve lost my appetite.” He stopped going to the dining room at mealtimes, choosing instead to have a tray brought to his apartment.

“I can’t hear what they’re saying on TV or at movie night in the main hall,” he said to the carpet. “Going to a movie is no good. I can’t make out the dialog clearly even with my hearing

aides.” With his hearing loss, he stopped watching movies. He had forgotten how to make telephone calls, so he stopped calling friends and even family members. He’d talk to family who called in, but not for lengthy conversations. The calls were difficult to follow and exhausting.

Steeped in his losses and daily medical challenges, William contemplated the ceiling light in despair, saying to himself, “What’s left to live for?”

“Throw in the towel. Enough already at 95,” he thought. “I’m tired. Tired of living. To help the kids one last time would be a good thing. I’ll try clinging to that idea,” he told the armchair. A half hour later, William had forgotten his self-conversation. It had vanished. He blinked in confusion, as a smiling staff aide brought in a meal tray.

“Dad, how are you this afternoon?” Caroline asked, as he emerged from the bathroom, having used a self-catheter to empty his bladder.

“How about going for a drive?” she asked. “It’s a bright, sunny day full of vitamin D.”

Without enthusiasm, he consented. Slowly mounting what he called his “motorbike” with Caroline’s help, he followed her to the elevator. He parked and plugged a recharging wire from his scooter into a socket near the sliding glass exit doors. She transferred him to one of the facility’s wheelchairs, and pushed him to her second-hand, cream-colored Mercedes in the parking lot. She had purchased the car for its large, roomy interior for increased comfort and easier access into and out of the passenger seats for her old parents.

She popped into a local ice cream shop, and came back to the car with cones in each hand.

“Peach or coconut, Dad?” she asked.

“You choose for me,” he answered. She handed him the coconut ice cream cone, saying, “Bon appetit.” She spread paper napkins in the laps, and one in the unbuttoned collar of his shirt. She drove slowly through a city park, stopping occasionally at the curb to watch swans swimming in a pond, or children laughing in play. William ate his ice cream quietly, and looked out the window

with apparent, but unexpressed, interest. Pulling over near a trash bin, she collected their used napkins and cone holders, and pitched them. Returning to the car, she asked, “Dad, if you’re feeling alright, we can drive through the countryside for more fresh air. Would you like that?”

“Whatever you say,” he replied, peering intently at the bin.

Rolling past yellow hayfields, dark wild woods, and playfully burbling streams, William seemed to enjoy himself.

“Dad, do you mind if I ask again about the ‘no transfer order?’” Caroline said.

“No, I don’t mind,” he said.

“How do you feel about it now?” she asked.

“I think it’s a good thing,” he replied.

“Well, that’s good, but how do you feel about it?”

“I already said I feel it’s a good thing.”

“Why does it feel like a good thing, Dad?”

“Because it’s time.”

“Time to die?”

“Yes, my time’s coming soon.”

“You say that more frequently nowadays, Dad. It makes me sad. Is there anything I, Jack, or Rory can do to bring you joy or ease your mind as you approach the end of life?”

“You already have.”

“What do you mean?”

“You children gave me a lifetime of joy and happiness. There’s nothing more to give.”

“We all love you very much.”

Behind a split rail fence, a sable mare with a golden mane stood next to her tawny foal. Caroline pulled over onto a grassy shoulder and parked opposite the horses so William could see

them. The horses turned their heads, with alert brown eyes and long ears facing the car. Sensing no cause for alarm, the mare bent her neck to graze. The foal continued watching, then walked behind its mother, out of view.

“Are you sure about the order?” Caroline asked, breaking the reverie. “Is that still your preference, Dad?”

“What? Yes, it’s my exit ticket, a gift,” he replied. “How happy those two animals are, mother and daughter. Not a care in the world.”

“What do you mean by ‘gift’, Dad?”

“It gives me free admission to death with dignity at the end of my life. Retaining some control and quality of life, peace, and all that. You and your brothers don’t worry yourselves. Isn’t that mare’s coloring beautiful, with her sleek, dark chocolate hair and contrasting gilded mane?”

“Yes, indeed. Ready to go back?” Caroline said.

“No, but I should catheterize,” he said.

William’s momentary clarity during the excursion lapsed upon their return to Whispering Hills. In the night, a fever developed. Urinalysis revealed yet another bladder infection. Antibiotics were prescribed and administered. His body responded well to the treatment in his apartment at the retirement village. Within three days his temperature was normal again. But, in the bleak isolation of his increasing apathy, confused loss of mental capacity, and listless physicality, nothing else was normal. Weeping and blinking away tears of undefined origin, he stared vacantly at some unrecognizable mechanical gizmo on the wall across the room.

