Table 1. Summary of data presented

Figure	Lines	Activity	Caring-touch	Function	Existentially positioning
1	1-7	Talking about death	Holding hand	Dr. D's touch grounds Mr. Goldsmith within an existential human contact	Relating-to-the-Other
2	16-25	Preparing for next phase	Stroking	Summarizing	Relating-to-the-Other
2	26-27	Transition: Lifeworld to Physical Examination	Keeping human contact	Maintaining the person-person relation in the background	Relating-to-the-Other Doctor-patient's body
2	39-40	Physical Examination	Lightly touching Mr. G's harm	Foregrounding the person-person level relation	Relating-to-the-Other Doctor-patient's body
2	42-46	Physical Examination	Hands Squeezing	Multiple: assessing patient's (1) neurological competence; (2) muscular strength/frailty; (3) potential to fight a health crisis and emotional preparedness to live; and (4) "enacting the patient's agency" (Raia & Deng 2015, p.87).	Relating-to-the-Other Doctor-patient's body
2	49-50	Physical Examination	Gentle shepherding	Guiding the patient from a supine to a sitting position	Relating-to-the-Other Doctor-patient's body
3	1-27	Talking about death	Holding hand	Dr. D's touch grounds Mr. Goldsmith within an existential human contact	Relating-to-the-Other
4	1-10	Talking about death	Holding hand	Dr. D's touch grounds Mr. Goldsmith within an existential human contact	Relating-to-the-Other
4	11-14	Transition: Death-as-part-of-living TO Medical Science	Thumb caressing	Backgrounding shared existential space	Relating-to-the-Other
4	14-18	Death-as-part-of-living TO Medical Science	Caressing	Transitioning in medical-science space	Relating-to-the-Other Knower-Learner
5	27-33	Concluding the encounter	Taking hold of Mr. G's hand	Reminding Mr. Goldsmith he is not alone	Relating-to-the-Other