

Picot question

Question: In patients with an illness, how does the moral distress from patients refusing treatment because of cost compared with unsuccessful treatments affect a nurse during their time working on the care unit?

Summary: Moral distress is common throughout nursing history and challenges of ethical dilemmas is unenviable. Moral distress is defined as knowing what is right and being in a situation in which it is impossible to do it. When a patient expresses, they cannot afford treatment what is the nursing and the healthcare team supposed to do. Persuade a client to continue despite the cost, lower standard of care, stop care, or change billing rules? A nurse might try to justify one argument listed above or even try to find a better solution resulting in sadness, anger, frustration and defeat. In the article “Moral distress experienced by intensive care nurses” the author states that a survey was conducted for nurses who frequently take care of high acuity ill patients and their moral distress could be caused by multiple categories. Incompetence or inexperience, limited resources, lack of consultation, communication, and nursing support (Langley 2015). According to CNBC the cost of medical treatment increases by 5% each year, and stated that millennials ages 24-30 where the age group most likely to avoid doctor visits, pay for their prescriptions, and forgo treatment plans. When a nurse cares for a dying patient a relationship is made between the two during their time together. Depending on how the patient was before the last days of their life can have a huge impact on a nurse. If the patient is coherent and able to converse and tell stories about their life and about their family, it makes the nurse- patient relationship more personal and can be very taxing on a health care personnel mental health.

Conclusion: In conclusion, both circumstances effect the nurse in great ways. Both present a dilemma that is not able to fix with a snap of a finger and can cause moral distress to any nurse in that situation. Refusing patient care because of cost can be morally distressful, but is related back to one thing, cost. While as the moral distress a nurse might deal with when treatment plans are unsuccessful can be related back to many categories of insufficiency. Both can cause great stress to a health care giver and should be assessed and questions to make a better solution.

Primary Article:

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Langley, G. C. (2015, November). *Moral distress experienced by intensive care nurses* .
www.researchgate.net. Retrieved January 18, 2022, from
https://www.researchgate.net/publication/283748612_Moral_distress_experienced_by_intensive_care_nurses#:~:text=The%20study%20found%20that%20nurses,influence%20in%20the%20healthcare%20system.

Secondary Article:

Weiner, S. (2001, June). *"I can't afford that!": Dilemmas in the care of the uninsured and underinsured*. *Journal of general internal medicine*. Retrieved January 19, 2022, from
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1495228/>

Tertiary Article:

Leonhardt, M. (2020, March 12). *Nearly 1 in 4 Americans are skipping medical care because of the cost*. CNBC. Retrieved January 19, 2022, from
<https://www.cnbc.com/2020/03/11/nearly-1-in-4-americans-are-skipping-medical-care-because-of-the-cost.html>