

ATI: Video Case Study Palliative and Hospice Care

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How can the nurse ensure that a client receiving palliative/hospice care is kept comfortable? What are some ways that the nurse could provide for the psychosocial and spiritual comfort of the client?

The nurse is responsible for taking interventions such as turning the patient, getting them enough blankets and pillows, and ensuring they get all of their medications as ordered to keep them comfortable. Turning the patient will help ensure that they do not get a sore and infection due to that sore. The medications will help ensure that the patient is without pain before dying. Being without pain will bring ease to the family and the patient. Doing these can help the patient and their family get peace in dying.

The nurse can consult with a spiritual leader of the patient's choosing and ensure that the patient can talk with them as much as possible. If the patient cannot communicate, the nurse can fulfill any requests from the family regarding any spiritual clothing or materials that the family wants on or near the patient. Doing these things can ensure that the family spiritually gets closure.

How can the nurse provide support for the family/loved ones of the dying client?

The nurse can support the patient's family by carrying out any wishes for the patient (provided that it is safe). These wishes include things like who cares for the patient (gender in certain religions), what kind of prayer cloths or beads the patient has, and postmortem care. The nurse can also consult with a spiritual leader at the family's request to ensure everything is completed correctly per the patient's religion. Providing support for the family of patients can be very hard for the staff, but it can significantly improve their situation.

What feelings occurred when interacting with a person with a life-limiting illness?

The student has interacted with several people with a life-limiting illness through their work in the emergency department. The student often feels profound sadness in these interactions, but there is also honor. The student feels that there are only a few moments more honorable and humbling than caring for someone in their final moments of life. Overall, interacting with someone with a life-limiting illness can come with a mixture of emotions but ultimately can be a great honor.

Were the feelings or emotions adequately handled?

The student believed that they had control over their emotions. While in the patient's room, the student stayed as calm as possible. Staying calm allowed the student to focus on caring for the patient. The student was able to keep their emotions contained, which helped the situation.

Was there adequate communication with the ill person?

The student believes that there was adequate communication with the patient. The student carried out all of the expressed wishes from the patient to the best of their ability. The student was able to assist the nurses in keeping the patient comfortable by getting blankets, food, and water. Overall, the patient could express all of their wishes and have them carried out promptly.

How did the person with the life-limiting illness feel during their interactions?

This specific patient was ready to pass away, so they felt a sense of calm and preparedness. The patient had decades of severe disease and had made peace with death. The patient was talking about their sense of fulfillment with the life that they had lived. The patient appeared calm and ready throughout the whole dying process.

Could the interactions have been improved in any way? How?

The student believes that improvement was not a possibility. The whole healthcare team worked with the patient and their family to make the experience as least burdensome as possible. Overall, the interactions were not pleasant but made better.