

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?

A nurse can ensure that a client is kept comfortable by preventing any further infections or injuries by frequently assessing the patient and repositioning. Treating the client's current physical signs and symptoms like pain and comfort with pharmacological medications may be needed. In clients near death, medication may be used for more comfort. To provide for psychosocial needs the nurse can use massage, music, or cognitive behavioral therapy. There are also medications that can be given to help with the client's anxiety. A nurse can consult spiritual personnel to meet the client's spiritual needs and allow spiritual rituals and values to be practiced. Nurses must advocate for the client in order for the client to be comfortable in the way they would like to be comfortable.

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

In nursing, therapeutic communication is essential. However, therapeutic communication is critical when supporting a dying client's family. Nurses must also educate the family on what is happening and what could happen when caring for a dying client. Nurses may also need to provide counseling and therapy referrals for the client's families during this time.

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

Many different emotions may happen while providing care to a client with a life-limiting illness. There are typical stages of dying that many people experience, like denial, anger, bargaining, depression, and acceptance. Some clients may not experience any of these feelings compared to someone experiencing all of them because everyone is different. A nurse must

understand the client's feelings and give them the support and guidance they need for this process. In my experience at clinical, a nurse was comforting a client that had just found out their cancer had returned. The nurse was also emotional for this client because she had seen the progress and provided care for the client throughout the treatment process. The nurse provided empathy to try and understand what the client is going through, sat with the client, provided tissues, and used therapeutic communication.

Were the feelings or emotions adequately handled?

The nurse handled the feelings adequately. The nurse sat and listened to the client's emotions with active listening skills. The client could calm down after speaking with the nurse and stopped crying. It could have went differently if the nurse did not care and did not notice the client was upset and check on them. Then the client's feelings would not have been appropriately handled.

Was there adequate communication with the ill person?

The nurse has a challenging job working in the cancer center and provided excellent communication and listening skills to comfort the client. She immediately noticed the client was emotional and walked over to her and asked if the client was okay. She sat down to be at eye level with the patient and to allow the patient to express their feelings. She showed great examples of therapeutic communication while speaking with the client.

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

The person with the life-limiting illness seemed to feel hopeless. They had described how they thought they would be okay and did not have to worry about their illness anymore. Also, the client had expressed how much their family had been going through and dealing with a death in

the family. The client stated they felt they could not get a break and did not want to bring more bad news back home to their family.

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

The interactions with the client and nurse were great interactions to experience, especially as a student nurse. However, at the cancer center, clients meet with the doctor to go over treatment before receiving their chemotherapy or any treatment needed that day. Therefore, when a client receives terrible news, they must still sit in a room for a few hours if receiving chemotherapy instead of going home and grieving. This is a good thing so the client can handle their emotions before going home, but also bad for those who like to be alone.