Palliative and Hospice Care Reflection

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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 can make sure that the patient's end-of-life needs and wishes are met and also try to keep the patient out of pain as much as possible. The nurse can provide psychosocial and spiritual comfort through non-pharmacological comfort measures such as music therapy, energy therapy, or bringing in a religious figure for the client's comfort.

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

The nurse can support the family by being there for them and allowing them to grieve for their loved ones. The nurse can also allow the family to participate in the caregiving process to help get closure.

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

When a person is going through a life-limiting illness, feeling hopeless or in disbelief is common. Even though the patient may have these negative feelings, it is still essential for a nurse to provide the best care possible and meet the needs and wishes of the patient.

Was there adequate communication with the ill person?

When I was working with a patient with a life-limiting illness, the patient was mainly in disbelief and denial. The nurses were very good at communicating with the patient, though, and kept him positive and ensured that the patient was well-informed about the situation.

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

During my experience with a life-limiting ill patient, it was evident that the patient was agitated with the nurses. The patient did not believe he had this illness and did not want to believe what the nurses told him. So he would get frustrated every time the nurses told him what he could and could not do.

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

The nurses could have improved their care for the life-limited ill patient. They tried to be positive with the patient but firm about his limits. Although the patient did not like what the nurses told him, the nurses took the best approach to caring for this patient.