Client Comfort and End of Life Care Reflection

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What was learned from this scenario?

I learned many things from this video case study. I learned how to appropriately communicate with not only the patient but the patient's family as well. I also learned that it can be challenging to communicate with the patient and their family when people have different opinions. It is best to use therapeutic communication when discussing comfort and end-of-life care at all times to gain respect from the patient and their family members.

Identify the biggest takeaways.

a) Explain the factors that influenced this decision.

The main takeaway of this case study was how a nurse should communicate when there is a disagreement on the plan of care between the patient and their family members. As a nurse, respecting the family and the patient is essential. It is also important to push for the patient if they can make their own decisions. The daughters are allowed to express their opinions, but overall, in this case, it is ultimately the patient's decision. As a nurse, understanding that this is a hard time for everyone involved is the key to therapeutic communication. If a nurse cannot communicate with all the family members and their different opinions, they should talk to the nurse manager. The factors that influenced this decision were the daughters of the patient. The nurse manager and clinician were also factors in this decision. After the nurse talks to both, they can talk to the family and help them decide.

What are some of the main problems or key issues expressed in the scenario?

The main problem expressed in this scenario was the patient's daughters' different opinions on her care. One of the daughters respected the patient's wishes to stop her aggressive treatment. On the other hand, the other daughter did not want her mom to stop her treatment. The daughter wanted her mother to live as long as possible and to keep fighting, no matter the

circumstances. The daughter also was reluctant to allow her mother to have any pain medications because she feared the effects it may have. Another problem in this scenario was the patient's grandchildren. The grandchildren were arguing and creating a noisy environment. This caused the patient not to get any rest.

What were some of the challenging decisions the nurse needed to make?

a) **Describe the rationale behind these decisions.**

The nurse needed to communicate with the daughters about their opinions of their mother's care. It made it difficult for the nurse to decide if she needed to give the patient pain medication. One daughter asked the nurse for it, while the other said she did not need to give the patient the pain medication. Another challenging decision the nurse needed to make was to ask the parents of the patient’s grandchildren if they could leave so the patient could get some rest. Even though that would be a challenging conversation, it is what is best for the patient. The nurse must also decide what to tell the nurse manager and the patient’s provider. It is essential to help them for their help if needed. These decisions are crucial for the client’s care. The nurse needs to know whether she needs to give the client pain medication. The nurse should ask the client privately what she would like since the patient can decide. It is also essential for the nurse to talk to the family members about the noise. The patient needs to get her sleep, and she cannot rest in a noisy environment.

What factors influenced the nursing decisions and responses during the scenario?

a) **Explain the response.**
b) **How will a nurse respond if this scenario presents again in the future?**

Many factors influence the nurse's decisions and responses. The daughters and the patient's grandkids were a factor. During the responses that were shown, the most appropriate were always therapeutic. It is essential to listen to everyone’s opinion when they are speaking. The nurse heard while the family talked and then spoke. The nurse should ensure that the

patient’s opinion is the top priority. It is essential to get the patient’s decision when discussing pain medication rather than the daughter’s. A nurse will respond with respect and therapeutic communication. If the nurse has any problems with a patient's family members, they should talk to their nurse manager about discussing the care plan.

Have similar situations been experienced in current clinical rotations?

a) **How did nursing or others respond to the situation? Please explain.**
b) **Describe successful communication strategies used or experienced in the clinical setting.**

I have not experienced a situation like this in a clinical rotation. However, I have experienced this situation as a care partner at Sarah Bush Lincoln Hospital. As a care partner at Sarah Bush Lincoln Hospital, I have experienced a situation in which the patient and family members did not agree on the care plan. The patient was ready to stop aggressive treatment, while the patient’s spouse wanted the treatment to continue. The nurse talked to the nurse manager and case management about the situation. Both members went into the room to speak to the patient and their spouse and talk them through the end-of-life process. Ultimately, the spouse agreed to follow the patient’s wishes. Overall, the communication used in this scenario was good. All healthcare workers respected the patient's wishes and did not try to pressure the patient and the spouse into anything. The healthcare workers used therapeutic communication. The workers' respect helped the patient and their spouse agree.

Discuss the advantages and disadvantages of having families discuss treatment options, including end-of-life decisions before a loved one becomes ill or early in a terminal illness.

An advantage of including the families in the treatment decision for end-of-life patients is that everyone will be prepared. This will allow the family to know the result and give them the chance to visit the patient as much as possible. This will also help with the after-death process. A disadvantage of including the families is if the family does not agree with each other or the

patient on the care plan. This can result in fighting and making the decisions hard. This can also cause the patient to decide that they did not want to make it in the first place.