

# Issues with end-of-life care in nursing essay sample

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To many, death may seem like a daunting topic, but it is a topic, which affects everyone and should be discussed. Every person deserves to have some autonomy when it comes to end-of-life care decisions. There are ethical and legal disputes that arise because of disagreements between patients, families, and medical professionals. Unfortunately, there is not always a clear right answer to what extent or how something should be done. How to care for a dying individual also presents a plethora of issues, especially for nurses. This is mostly due to lack of support in the work place and community settings for that patient and their family. Analyzing these issues can only aid in more open discussions and the progressive evolution of better care for terminal patients. Ultimately, better care and education can assist these patients in dying with the dignity they rightfully deserve.

Nurses must follow a certain code of ethics in which they are held accountable for maintaining a patient's healthy status or returning them to a state of well-being and doing so without causing them physical or emotional pain (Izumi, Nagae, Sakurai, & Imamura, 2012). When it comes to end-of-life care, nurses must also "alleviate suffering" (Izumi et al, 2012, p. 614). This is a very important code to stand by as it pertains to caring for patients before death, because there can be a great deal of controversy between physicians, families, and the patient's wishes. This statement by Izumi et al (2012) "nursing care to alleviate suffering is meant for all individuals, families, and communities" shows how important it is for nurses to listen to everyone and comfort everyone through this process of dying. That means that nurses have a duty to not only their patient, but to everyone close to them, to ensure that they do not endure any pain from decisions that are

made. These ethical dilemmas faced are: who has the right to palliative care, when should it be introduced, and who is the final decision maker. If the questions are not discussed when nurses are caring for their patients, then they will go unanswered and the code of ethics that nurses stand by will have been breached (Izumi et al, 2012). Discussing end-of-life care is necessary with all individuals, healthy and sick, to prevent legal and ethical battles when the necessary time comes to make these final decisions (McGowan, 2011).

Death must be defined in specific ways to prevent legal complications when it comes to exacerbating treatment options and the patient's own right of refusal. There are parameters in place that take away certain aspects of individual autonomy. This is why sufficiently documenting end-of-life care wishes and appointing another individual to make medical decisions for you is imperative (McGowan, 2012). Nurses play a key role in helping patients and their families make these decisions. If nurses are not aware of how to effectively communicate regarding death, the amount and quality of care the nurse can provide will be severely limited.

Hospitals and other healthcare facilities have an obligation to provide adequate care to patients who are dying. It is the facility's responsibility to ensure that there are training programs on caring for the dying readily available for health care professionals, and to provide support for these staff members; death requires a great deal of attention to be paid to the patient and the family. The study that Bloomer and O'Connor (2012) conducted showed that a nurse's top priority when caring for a dying patient was to

prepare the family and comfort them, not only before but, during and after the passing. Grief is not something that just happens for a moment, it lasts a lifetime. Acknowledging that a family may want to sit with the deceased for some time after or perform some type of ritual is very important in the nurse's role. Hospitals can be overwhelmed with patients and nurses, according to Bloomer et al (2012), who feel they are " pressured to transfer the dying patient" (p. 27). This does not always allow for the family to grieve in a way that they choose. It also may require them to be assigned to a new nurse, one who has not been with them through the entire dying process and will not be able to effectively communicate with the family to support them in the way they need.

Nurses must have the ability to assess their patients for underlying signs and symptoms especially in a patient who is dying. These patients may be unable to communicate or express how they are feeling. It is the responsibility of the nurse to evaluate the patient based on knowledge, prior experience, and what he/she knows about the patient. Managing a dying person's symptoms can be the highest priority in eliminating pain and suffering throughout the process. According to (" Symptom management," 2011), " it is important to plan ahead for access to medications for the common symptoms" (p. 1), especially if a patient wishes to die at home, in which the family or caregiver will be responsible for administering medications. If nurses are not able to teach families and caregivers the proper methods to assess symptoms and administer medications, than the patient is not going to be receiving the care they deserve.

There are a number of issues relating to caring for the dying patient and there are ways to resolve these issues, but first they must be addressed. The problems faced do not just affect the patient experiencing death, but those also affected include: the nurses caring for the individual, the families, the healthcare facilities, and other healthcare professionals. Being aware of what patients face when dying and how they wish to do so can help alleviate the pressures that are placed on family members during this process. Also, discussing the ethical and legal boundaries that are present within society and overcoming them is one major part of ensuring that every individual experiences death with dignity.

## References

Bloomer, M. J., & O'Connor, M. (2012). Providing end-of-life care in the intensive care unit: Issues that impact on nurse professionalism. *Singapore Nursing Journal*, 39(3), 25-30. Izumi, S., Nagae, H., Sakurai, C., & Imamura, E. (2012). Defining end-of-life care from perspectives of nursing ethics. *Nursing Ethics*, 19(5), 608-618. doi: 10. 1177/0969733011436205 McGowan, C. M. (2011). Legal Issues. *Legal Aspects of End-of-Life Care*. *Critical Care Nurse*, 31(5), 64-69. doi: 10. 4037/ccn2011550 Symptom management at the end of life. (2011, March 2). Retrieved from [http://www. caresearch. com. au/caresearch/tabid/741/Default. aspx](http://www.caresearch.com.au/caresearch/tabid/741/Default.aspx)