Title:
Nurses’ Perceptions of Caring for Dying Patients in Critical Care: A Phenomenologic Study

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Session Title:
End-of-Life Care
Slot:
H 01: Monday, 30 October 2017: 2:45 PM-3:30 PM
Scheduled Time:
3:05 PM

Keywords:
Caring for the dying patient, Critical Care and Dying with Dignity

References:


Abstract Summary:
This study focuses on caring for the dying patient in the critical care unit (CCU) and whether those patients at the end-of-life can die with dignity.

Learning Activity:

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<tbody>
<tr>
<td>The learner will be able to identify the barriers to dying with dignity in the CCU.</td>
<td>The barriers to dying with dignity are physicians, nurses, patients, families, lack of education at multiple levels, and public awareness.</td>
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<td>The learner will be able to describe the actions necessary to move past the barriers of dying with dignity.</td>
<td>Moving past these barriers will require higher levels of education and experience caring for the dying patient. The education necessary must take place in medical and nursing school, in-hospital orientation and continued education, and in public venues to educate the public.</td>
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Abstract Text:
Dying with dignity in the critical care unit (CCU) is a difficult process to define and limited information is available to assist with that definition. The purpose of this descriptive phenomenological study was to explore the critical care nurses lived experiences of caring for the dying patient in CCU. Understanding nurses’ perceptions and lived experiences of the phenomena will contribute to nursing knowledge, new insights for nurse leaders, and the possible development of a nursing model to guide nurses who are
providing care to the dying patient. A qualitative, descriptive phenomenological methodology was used to guide this study. Twelve critical care nurses were recruited and interviewed, exploring their lived experiences of caring for the dying patient in the critical care setting. Three board questions comprised the interview guide allowing each nurse an opportunity to share their lived experiences of caring for the dying patient. Five themes emerged from the data: communication, family, technology, lack of education, and dying with dignity. Recommendations included early discussions with patients and families regarding end-of-life wishes as well as, strategies for nurses providing end-of-life care. The study participants also noted the need for increased awareness and education for patients, families and health care providers regarding end-of-life care, dying with dignity, and palliative and hospice referrals. Community education was also noted as an integral part of the awareness process. For nurses and physicians, the education should start during their basic education program and continue throughout their career especially those working in high acuity areas in health care. As in life, death and dying are important aspects of all of health care providers. Facilitating quality end-of-life care could relieve pain and suffering for the dying patient and assist family members with allowing their loved one, the patient to die with dignity. Dying with Dignity should be the primary focus for the patient at the end-of-life.