

Week 8 Discussion: Case Study or Share an Experience (graded)

2 2 unread replies. 2 2 replies.

Purpose

This week's graded topics relate to the following Course Outcome (CO).

- CO 2 - Recognize the influence that developmental stages have on physical, psychosocial, cultural, and spiritual functioning. (PO #1)

Discussion

This week you have two options for your initial discussion post. Select the option that is best for you! Please remember to use and credit the lesson or required NIH website (there was not a textbook reading this week), AND one outside scholarly source.

Option #1 - Case Study to Consider

Ann and Michael have been married for 55 years. Ann is 80 years-old and suffers from lung cancer and advanced Alzheimer's disease. She currently resides in a nursing home, and often does not recognize Michael when he visits. Last night she was admitted to the hospital with difficulty breathing. Today, you are the nurse caring for Ann, and her physician is suggesting surgery to remove part of her lung to potentially slow the progression of her cancer. Michael is feeling unsure about this course of treatment and asks for your advice and guidance.

How would you respond to Michael and serve as advocate for your patient?

Option #2 - Share a Related Experience

Share with your classmates a time when you cared for a patient at the end of their life. This may be a time when you assisted the patient (or their support system) with decisions related to end of life care; or a time when you were present for the death of a patient.

What were your observations related to this experience? Do you believe it was a peaceful death? What went well? Can you think of anything that could have made the experience better for the patient and/or family?

Hi Class,

Happy Week

8!

Thanks in advance for thoughtfully considering one of the three posting options you have for this week. I look forward to one more interesting and engaging discussion.

Please remember to use and credit the lesson or required NIH website (there was not a textbook reading this week), and one additional outside scholarly source.

In care,

Pat

Reply:

Hello Professor and fellow classmates,

I have chosen the case study on Ann and Michael to present on. As a health care advocate and provider, I would first show empathy to Michael during this difficult time to build a positive rapport with him and his wife. It seems as Michael is the decision maker since his wife has Alzheimer's disease, resides in a nursing home and is unable to recognize him during his visits. I would ask Michael if his wife ever expressed what her wishes were with declining health. I also would ask if they had completed a Power of Attorney over Health Care document and a Living Will. Ann's wishes may be expressed in these types of documents and this would assist him with his decision.

I would then ask about family dynamics to assess his support system. Family may be available to help with making his decisions related to caring for his wife. I would also ask Michael if he understood the procedure for the surgery and the risk factors involved. I would want Michael to be educated about lung cancer. I would first build a positive rapport with him and Ann. I would provide pamphlets and brochures as well provide him easy to read and understand the research I provide for him. I would also tell him about what is expected if he does make the decision in following through with the surgery.

I would review any questions he had and review post-surgical risk factors for his wife. He may want to ask how this surgery will affect her quality of life and will it make a difference in her comfort. I would also conference with the MD for an order for evaluation for Palliative care/ Hospice care. Ann may benefit from these types of services to maintain comfort. Palliative care can treat symptoms of her Cancer and Alzheimer's and allows for curative interventions. It can improve patient centered care and prolong a patient life with decrease in hospitalizations, ER visits and promote comfort.

Hospice care is usually ordered when a patient has 6 months or less to live and they are at the end of their disease process. If a patient live longer than 6 months on hospice care a doctor can certify that the patient is still close to dying and Medicare will continue to pay for Hospice services (NIA, 2017). Hospice is to relieve symptoms and maintain comfort and dignity at end of life. Hospice will focus on quality of life rather than the length. It is the last phase of the patient's illness. Many patients will start out with Palliative care and transition into Hospice care as the disease advances to end stage. According to Procter et al. (2019), "For patients and cares to recognize that they might benefit from hospice care, clinicians first need to address the clinical

uncertainty and hopeful optimism that sustains families and prevents discussion and acceptance of the terminal nature of the illness (p. 883).”

Based on Michael and Ann’s overall decision related to the treatment plan, I would review the level of care to ensure Ann is able to return to her current home environment. This also would be coordinated with the Case Manager in the hospital. The nursing home would have to be equipped to take care of her condition regardless of her care needs. Knowing the options ahead of time can relieve some of Michael’s anxiety. Questions to ask the nursing home would be- Do you care for Hospice residents? Do you care for skilled care post-surgical residents with cognitive impairments? Do you have a skilled unit that accepts insurance and Medicare? Do you have a bed available for this resident with the level of care she may need?

Ensuring Michael that his loved one, Ann will receive expert medical care, pain management, emotional, spiritual support will give him a sense of security in his decisions. When health care providers engage, educate and deliver high quality care then the patient can achieve their health care goals and live a quality patient-centered life.

References:

Procter, S., Ooi, M., Hopkins, C., & Moore, G. (2019). A review of the literature on family decision-making at end of life precipitating hospital admission. *British Journal of Nursing*, 28(13), 878–884. <https://doi-org.chamberlainuniversity.idm.oclc.org/>

Understanding Healthcare Decisions at the End of Life. (2017, May 17). <https://www.nia.nih.gov/health/understanding-healthcare-decisions-end-life>