

Answers

CHAPTER 17 NURSING CARE OF PATIENTS AT THE END OF LIFE

AUDIO CASE STUDY

Mr. Sellers at the End of His Life

1. A durable medical power of attorney is a person appointed to make decisions for someone who is no longer able to make decisions for him or herself. A living will details exactly what the patient would want when he or she is no longer able to make decisions.
2. These documents only take effect when the patient is no longer able to make his or her own decisions.
3. Progressive weakness, weight loss greater than 10% in 6 months, sleeping a lot, stating he was “ready to go.”

VOCABULARY

1. living will
2. durable power of attorney
3. hospice
4. postmortem
5. advocate

TRUE OR FALSE?

1. False. They usually lose weight.
2. False. Most companies provide a hospice benefit.
3. True
4. True
5. False. They will only be discharged if they are no longer terminal.
6. True
7. False. Cardiopulmonary resuscitation (CPR) must be started within 3 to 5 minutes.
8. True
9. True
10. False. Weight loss and functional decline are two common indicators.

CRITICAL THINKING

1. Dyspnea: Administer morphine, administer oxygen, elevate head of bed, place a fan in the room, provide massage and muscle relaxation.
2. Bowel and bladder incontinence: Keep perineal area clean, change briefs often.

3. Copious oral secretions: Adjust the patient’s head so secretions go down throat, place humidifier in room, administer hyoscyamine or scopolamine, administer low-dose morphine, suction.
4. Body temperature changes: Administer acetaminophen, change clothing as needed, provide warm blankets, change bedclothes and bed linens as needed.
5. Restlessness: Assess and treat discomfort such as urinary retention, fecal impaction, pain medication toxicity; reposition in bed; administer oxygen.

REVIEW QUESTIONS—CONTENT REVIEW

*The correct answers are in **boldface**.*

1. **(2)** is correct. (1, 4) are not associated with tube feeding. (3) could occur but was not shown with research.
2. **(3)** is correct. (1, 2, 4) are good questions but do not assess the patient’s understanding.
3. **(1)** is correct and is a therapeutic response. (2, 3, 4) help the staff or other patients but do not help the family.

REVIEW QUESTIONS—TEST PREPARATION

*The correct answers are in **boldface**.*

4. **(2)** is correct. (1, 4) are also effects of morphine but are not the reason it is given to a dying patient. (3) is incorrect. Morphine will not affect temperature.
5. **(2)** is correct. (1, 3, 4) may also be necessary steps, but allowing the family to spend time with the patient (and having the patient look presentable) is the most important.
6. **(3)** is correct. (1) is incorrect. Redirecting a patient is appropriate only if the patient is expected to improve. (2) is incorrect. The medications may play a part, but this statement does not help the family. (4) is incorrect. Oxygen may be used for comfort but may not improve the thought processes of a dying patient.
7. **(4)** is correct and validates the daughter’s feelings. This may help her make a decision. (1) may be appropriate if she needs clarification but is not the best response while she is upset. (2, 3) may be true but do not address her upset feelings.
8. **(4)** is correct. (1, 2, 3) are important but do not address the specific circumstance of home resuscitation.
9. **(2)** is correct. Cultural traditions should be supported if at all possible. (1, 3, 4) are incorrect. They ignore the importance of the family’s cultural tradition.

10. (1, 2, 4) are correct. Dyspnea and swelling around tumors are reduced when fluids are withheld; research has shown no benefit to hydration for patients who are actively dying of cancer. (3) is incorrect. It is theorized

that dehydration results in increased production of endorphins. (5) is incorrect. Research shows that patients do not express feelings of hunger or thirst near the end of life, although dry mouth is experienced.