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A Lung Cancer Patients with Septic Shock Nursing Experience

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Abstract: Objective: This article explores the nursing experience of an 84-year-old male lung cancer patient who underwent a thoracoscopic right lower lobectomy and treatment. The patient has multiple medical histories, including hypertension and diabetes. The nursing process involved cancer treatment, postoperative pain management, as well as wound care and healing. Methods: The nursing period is from February 10 to February 17, 2024. During the nursing process, pain management strategies are implemented, including morphine drugs and non-drug methods, and music therapy, essential oil massage, and extended reception time are used to make patients feel physically and mentally comfortable so as to reduce postoperative pain and encourage active participation in rehabilitation. Strict sterile wound dressing procedures and advanced wound care techniques are used to promote wound healing and prevent infection. Due to septic shock, dialysis is used to relieve worsening symptoms. Taking into account the patient's cancer status, the nursing team provides comprehensive cancer care based on the patient's physical and psychological needs. Given the complexity of the patient's condition, including advanced cancer, palliative care is also incorporated throughout the care process to relieve discomfort and provide psychological support. Results: Through comprehensive health assessment, the nursing team fully understood the patient's condition and developed a personalized care plan based on the patient's condition. The interprofessional critical care team provides respiratory therapy and lung expansion exercises to reduce muscle loss while addressing the patient's psychological status, pain management, and vital sign stabilization needs, resulting in a comprehensive approach to care. Lung expansion exercises and the use of a highfrequency chest wall oscillation vest successfully improved sputum drainage and facilitated weaning from mechanical ventilation. In addition, helping patients stabilize their vital signs and the integration of cancer care, pain management, wound care and palliative care helps the patient be fully supported throughout the recovery process, ultimately improving his quality of life. Conclusion: Lung cancer and septic shock present significant challenges to patients, and the nursing team not only provides critical care but also addresses the unique needs of patients through comprehensive infection control, cancer care, pain management, wound care, and palliative care interventions. These measures effectively improve patients' quality of life, promote recovery, and provide compassionate palliative care for terminally ill patients. Nursing staff work closely with family members to develop a comprehensive care plan to ensure that patients receive high-quality medical care as well as psychological support and a comfortable recovery environment.

Keywords: septic shock, lung cancer, palliative care, nursing experience **Conference Title:** ICCN 2025: International Conference on Cancer Nursing

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