Intensive Care Nursing Experience of a Lung Cancer Patient Receiving Palliative

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Abstract : Purpose: This article explores the intensive care nursing experience of a terminal lung cancer patient who received palliative care after intubation. It examines the sadness and reluctance of the family as they faced the patient's worsening condition and impending death. Methods: Diagnosed with lung cancer in 2018, the patient underwent chemotherapy and radiation therapy with regular outpatient follow-ups. Due to brain metastasis, poor pain control, and ineffective treatment, the decision was made to withdraw the endotracheal tube and proceed with palliative care in the ICU. The care period involved a holistic assessment using physical, psychological, social, and spiritual dimensions, including medical record review, consultations, family meetings, and collaboration with both the intensive care and palliative care teams. Health issues identified included pain, ineffective breathing patterns, fear of death, and altered tissue perfusion. Results: During the care process, the palliative care team and family employed various methods, including listening, caring, companionship, opioid medications, essential oil massage, distraction techniques, and comfortable positioning to alleviate pain and respiratory symptoms. The principles of palliative care were applied, and the team facilitated expressions of gratitude, apology, and love between the patient and family. This approach ensured a dignified death for the patient and a peaceful transition for the family. The experience highlights the importance of promoting palliative care principles for higher-quality patient and family care. Conclusion: In caring for terminal patients, collaboration with multidisciplinary teams, including social workers, spiritual care providers, psychologists, and nutritionists, is essential. Engaging family members in decision-making and continuing palliative care in a more personalized setting after symptom improvement can enhance the guality of care and improve the patient's quality of life.

Keywords : intensive Care, lung cancer, palliative care, quality of life.

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