



STUDENT'S NAME: _____

LEVEL: _____

DATE: _____

WORKSHEET 3

DEATH AND DYING

In the hospital setting, both nurses and doctors play critical, complementary roles in the care of patients during the dying process. Their shared goal is to ensure that patients receive compassionate, high-quality care while minimizing suffering and supporting the emotional needs of both the patient and their family. The roles of nurses and doctors, while distinct, overlap in many ways to provide comprehensive end-of-life care.

Role of Doctors:

Doctors, particularly those specializing in palliative care, oncology, or intensive care, are primarily responsible for diagnosing the patient's condition and determining the most appropriate course of treatment. In the dying process, their role shifts from curative interventions to focusing on palliative care aimed at improving the patient's comfort and quality of life. Doctors are responsible for assessing the patient's condition, prescribing medications to manage pain and other symptoms (such as nausea, breathlessness, or anxiety), and making decisions about whether to continue or withdraw aggressive treatments like resuscitation or mechanical ventilation.

Doctors also play a key role in communicating with patients and their families about the prognosis, the expected course of the dying process, and treatment options. This often includes discussing advanced directives, do-not-resuscitate (DNR) orders, and whether to pursue hospice care. These conversations require sensitivity, as they often involve delivering difficult news and helping families make emotionally charged decisions about their loved one's care.

Role of Nurses:

Nurses are more continuously involved in the direct care of the dying patient, often spending more time at the bedside than doctors. They are responsible for the ongoing monitoring of the patient's condition, managing pain and symptoms as

prescribed, and providing emotional and **psychological support**. Nurses act as patient **advocates**, **ensuring** that the patient's **wishes** are honored and that the care team remains aligned with the goals of comfort and dignity.

In addition to **administering medications**, nurses provide **comfort measures** such as repositioning the patient, managing **wounds**, and ensuring that **basic needs**, such as hydration and hygiene, are met. They also play a critical role in educating the patient's family about what to expect during the dying process and how they can participate in providing comfort to their loved one.

Collaborative Care:

The care of dying patients in a hospital often involves **close collaboration** between doctors and nurses. Together, they coordinate care plans, **reassess** the patient's needs, and **adjust treatment** to maintain comfort. Nurses frequently **update** doctors on **changes** in the patient's condition, allowing for timely medical interventions or **adjustments** in care strategies.

Both nurses and doctors also work **alongside** social workers, **chaplains**, and other hospital staff to address the spiritual and **emotional needs** of patients and their families. This **interdisciplinary approach** ensures that end-of-life care is **holistic**, attending not only to physical symptoms but also to the psychological and **existential concerns** that arise during the dying process.

In essence, doctors provide the **medical leadership** and direction of care, while nurses deliver ongoing, hands-on care and **support**. Together, they create a **compassionate environment** that honors the patient's dignity, reduces suffering, and supports families through one of the most **challenging** experiences they may face.

Based on the text provided, classify the roles as belonging to **Doctors**, **Nurses**, or **Both**. Write your answers in the blank spaces.

1. **Prescribing medications to manage pain and other symptoms** _____
2. **Monitoring the patient's condition continuously at the bedside** _____
3. **Discussing prognosis and treatment options with the patient's family** _____
4. **Administering medications and repositioning the patient for comfort** _____
5. **Making decisions about whether to continue or withdraw aggressive treatments** _____
6. **Educating the patient's family about the dying process and comfort measures** _____
7. **Assessing the patient's condition and determining the course of treatment** _____

8. Providing emotional support and psychological care to patients and families _____
9. Collaborating on care plans to adjust treatments based on patient needs _____
10. Delivering direct, hands-on care throughout the dying process _____