**Fundamental of Nursing Theory II**

**Student Name:** Yafa Nimer Ahmad Abu Layya1201212. **Date:** 16/05/2021.

**Case Study analysis: -**

Mrs. G, 75, was admitted to the hospital after repeated episodes of pneumonia. Despite aggressive antibiotic therapy, her condition rapidly deteriorated and she died unexpectedly 1 week after being admitted to the hospital. Mrs. G’s oldest son, who lived nearby and frequently cared for his mother, arranged for the funeral and visited with relatives. He misses his mother and cries occasionally but managed to return to work the following week. The youngest son had difficulty attending the funeral, has been unable to sleep or eat, cannot concentrate at work, and cannot believe that his mother is dead. The middle son did not weep at the funeral and had little to say to his brothers or other relatives. He returned home to another state but has remained distant. He is back to work but feels very fatigued and apathetic.

1. **Briefly, Describe the pathophysiology of Mrs. G disease (Pneumonia)?**

Any infectious organisms that reach the alveoli are likely to be highly virulent, as they have already evaded the host’s physical defense mechanisms. Consequently, they may overwhelm the macrophages, resulting in production of a fibrin-rich exudate that fills the infected and neighboring alveolar spaces, causing them to stick together, rendering them airless. The inflammatory response also results in a proliferation of neutrophils. This can damage lung tissue, leading to fibrosis and pulmonary edema, which also impairs lung expansion. The inflammatory response can also lead to the development of a pleural effusion which is thought to complicate up to 40% of cases of pneumonia. These changes result in reduced gaseous exchange. As a result, vital organs become oxygen deprived and the respiratory effort required with each breath will be increased as a result of the disturbance in normal physiology. Respiratory and heart rate will increase in response to falling oxygen and rising carbon dioxide levels.

1. **What prevention measures should Mrs. G follow to decrease the risk of pneumonia?**

1.Get Vaccinated: get a flu shot every year to prevent seasonal influenza. get vaccinated against pneumococcal pneumonia, a common form of bacterial pneumonia. There are several other vaccines that can prevent infections by bacteria and viruses that may lead to pneumonia.

2.Wash your hands frequently.

3.Don't Smoke: Tobacco damages your lung's ability to fight off infection.

4.Be Aware of Your General Health, and follow a good health habit.

1. **From the data provided, describe the phase of bereavement being experienced by each of the three surviving sons.**

1.The oldest son: Acceptance stage, he cries and misses his mom, but is aware of her death and accepts it.

2.The middle son: Depression stage, he didn't cry or talk and showed no reaction, he was tired and withdrawn.

3.The youngest son: Denial stage, He can't believe his mother died, he still denies it, he can't sleep, eat and focus.

1. **What type of loss, bereavement does Mrs. G family faced?**

Loved one’s loss.

1. **What factors may have affected how each of the sons reacted to the death of their mother?**

* Age: early and middle adulthood (Death of parents)
* Significance of the loss: importance of the lost person, degree of change required because of the loss.
* Culture: death of nuclear family member in culture with extended family may soften impact.
* Gender: males frequently expected to "be strong".
* Socioeconomic status: affects available support system
* Support system.
* Cause of loss or death: pneumonia considered as "clean" disease; this engenders compassion.

1. **What cues might have indicated that Mrs. G. was dying, even though her death was unexpected?**

Mrs. G, 75, was admitted to the hospital after repeated episodes of pneumonia. Despite aggressive antibiotic therapy, her condition rapidly deteriorated and she died unexpectedly 1 week after being admitted to the hospital.

1. **With the diagnosis of pneumonia, what physiological (palliative) needs might she have had?**

Antibiotics and care in an intensive care unit (ICU), to reduce pain, help with sleep, or reduce feelings of anxiety, also help with a person psychological and emotional support and spiritual needs.

1. **How might your own feelings about death affect the care you provide to the dying client?**

It will be a positive effect, I am a little afraid of death, especially if someone is close to me and love him very much, and when looking from the angle of the dying person it is known that he has someone who loves him and cares about him, so I will do my best to provide all kinds of care that can make him complete his life Or, help him spend the remaining time of his life in comfort and peace with those he loves.

**References: -**

1. <https://lms.rn.com/courses/1777/index.html?jmptopg=pathophysiology_of_pneumonia.html>
2. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/pneumonia/preventing-pneumonia#:~:text=Get%20Vaccinated,common%20form%20of%20bacterial%20pneumonia>.
3. <file:///C:/Users/User/Desktop/Books/Medical%20Surgical.pdf> page559(pathophysiology), page561(prevention).
4. Chapter 43: Loss, Grieving, and Death.
5. <https://www.thoracic.org/patients/patient-resources/resources/palliative-care.pdf>