

Summary

Thema of my Bachelour's Paper is care about non-curable and dying patients at the Intensive Care Units. The reason is that I meet these patients nearly everyday when I enter at the Intensive Care Units of all departments. We find references about paliative and terminal care in literature first of all in the connection with oncologic patients. But it is very important to realize that patients also die for many types of other diseases which are serious , hurt and destroy. These patients also have the right to receive a good supporting therapy which helps them to live them from the life without distress and with honor.

My Bachelour's Paper consists of two main parts – teoretical and empiric.

Teoretical part – first of all this part solves the problem of care about non-curable and dying patients who are in the meantime of the Intensive Care Unit. There are sorted the terms as phases of non-curable disease, symptoms which occur the most during these conditions, pain and its therahy, etic aspects in care about these dying patients.

The second part – empiric is devoted how to value nurse personal care about non-curable and dying patients at the Intensive Care Unit from the sight of nurse who work at selected Intensive Care Units of Faculty Hospital in Hradec Králové – GMK ICU internal, GMK ICU geriatric, ICU cardiologic and arytmologic, ICU neurosurgery. The aim of this research was fallowing: to find opinion of nurse as far concern of providing care of non-curable and dying patients, which therapy is offered and provided for these patients, how their relatives are participated in this care and which way nurses themselves compare with care about dying patients providing to dying patients. The results of research are worked up the tables and graphs.

The result of research have shown that nurses from all selected departments apreciate providing care for patients in the area of bio-psychi-social in total as exceltent or very good level of care. Nurses also value cooperation with family to much, family's helps during therapy and also possibility for relatives to be together with dying patient during the whole time of their suffering. They can also take leave with them after death.

It is evident from nurses' ansures to to my questions what they would with to improve in care about non-curable and dying patients in their working place. They would have an interest about education in this sphere. Further they think thatincreasing of the number of nurses would improve a quality of care. They also soppot to form a special beds for these patients or situate tham at a special place which would be suitable for this type of care for non-curable and dying patients.