

Characterization, conservation and loss of dignity at the end-of- life in the emergency department. A qualitative protocol

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Aims: To explore and understand the experiences of terminally ill patients and their relatives regarding dignity during end-of-life care in the emergency department. **Background:** The respect given to the concept of dignity is significantly modifying the clinical relationship and the care framework involving the end-of-life patient in palliative care units, critical care units, hospices and their own homes. This situation is applicable to in-hospital emergency departments, where there is a lack of research which takes the experiences of end-of-life patients and their relatives into account. **Design:** A phenomenological qualitative study. **Methods:** The protocol was approved in December 2016 and will be carried out from December 2016?December 2020. The Gadamer's philosophical underpinnings will be used in the design and development of the study. The data collection will include participant observation techniques in the emergency department, in-depth interviews with terminally ill patients and focus groups with their relatives. For the data analysis, the field notes and verbatim transcriptions will be read and codified using ATLAS.ti software to search for emerging themes. **Discussion:** Emerging themes that contribute to comprehending the phenomenon of dignity in end-of-life care in the emergency department are expected to be found. This study's results could

have important implications in the implementation of new interventions in emergency departments. These interventions would be focused on improving: the social acceptance of death, environmental conditions, promotion of autonomy and accompaniment and assumption (takeover) of dignified actions and attitudes (respect for human rights). © 2018 John Wiley & Sons Ltd

dignity

dying

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qualitative research

relative

social acceptance

software

terminal care

terminally ill patient

aged

attitude to death

emergency health service

female

health care personnel

male

middle aged

palliative therapy

personhood

procedures

psychology

right to die

terminal care

very elderly

Adult

Aged

Aged, 80 and over

Attitude to Death

Emergency Medical Services

Female

Health Personnel

Humans

Male

Middle Aged

Palliative Care

Personhood

Qualitative Research

Right to Die

Terminal Care

Terminally Ill