



CHAPTER III

RESEARCH QUESTIONS, OBJECTIVES

AND DEFINITION OF TERMS

This chapter is focused on the research questions, objectives of the study and definition of terms, for the following five studies: 3.1 retrospective study of the medical records of terminally ill patients; 3.2 attitude study in non-critically ill patients; 3.3 non-randomized control study in terminal ill patients; 3.4 focus group discussions with nursing staff; 3.5 self-administered questionnaires for medical staff.

3.1 Retrospective Study of the Medical Records of Terminally Ill Patients

3.1.1 Research Questions

1. What percentage of terminally ill patients had CPR performed before their death?
2. What was the clinical condition of terminally ill patients?
3. How was CPR attempted?

3.1.2 Objectives of the study

The objectives of this study were to identify the proportion of CPR, the severity of illness, and the outcome of CPR attempted in patients with terminal illness in Chiang Mai University Hospital.

3.2 Attitude Study in Non-Critically Ill Patients

3.2.1 Research Questions

1. What was the attitude towards advance directives (ADs) for CPR in non-critically ill patients?
2. What was the percentage of ADs preference for CPR among non-critically ill patients?

3.2.2 Objectives of the study

To assess the attitude and preferences of advance directives for CPR among non-critically ill patients who were admitted to general medical wards of CMU Hospital

3.3 Non-Randomized Control Study in Terminally Ill Patients

The purpose of this study was to answer the following questions:

3.3.1 Primary Research Question

- 3.3.1.1 In CMU Hospital, did the application of advance directives to terminally ill patients reduce the cardiopulmonary resuscitation rate in patients who received advance directives by 50% as compared to terminally ill patients who did not receive the advance directives?
- 3.3.1.2 Was the clinical status of terminally ill patients who received advance directives similar to those who did not receive advance directives?

3.3.1.3 Did the application of advance directives to terminally ill patients result in similar mortality rate at one month of the study period as compared to terminally ill patients without advance directives?

3.3.2 Secondary research questions

3.3.2.1 What percentage of terminally ill patients and families decide to employ advance directives regarding CPR?

3.3.2.2 What was the proportion of the terminally ill patients with whom physicians discuss the possibility of CPR?

3.3.2.3 What was the level of agreement between CPR attempted and the patient physician discussion regarding CPR?

3.3.2.4 What were the patients' conditions and circumstances when advance directives should be performed or omitted?

3.3.2.5 What was the proportion of families who discuss CPR with the physicians without patient's involvement?

3.3.2.6 What was the agreement between family's decision and the patient's statement about CPR?

3.3.2.7 What was the agreement between physician's decision and the patient's statement about resuscitation?

3.3.2.8 Was there a discrepancy between what physicians say they ought to do about CPR and their practice?

3.3.3 Objectives of the study

- 3.3.3.1 To assess the effectiveness of advance directives as applied to patients with terminal illnesses.
- 3.3.3.2 To introduce the concept of advance directives for terminal care in terminally ill patients in CMU Hospital.
- 3.3.3.3 To determine the views of patients, families, physicians and nurses whether advance directives can be initiated for terminal illnesses in CMU Hospital and, if so, under what conditions and circumstances.
- 3.3.3.4 To determine the views of patients, families and physicians whether advance directives were acceptable for CPR, CPR requiring mechanical ventilation, artificial ventilation, analgesia, artificial hydration and nutrition, and hospitalization.
- 3.3.3.5 To give appropriate recommendation(s) regarding the use of advance directives for terminal care in terminally ill patients in CMU Hospital based on sound research results.

3.4 Focus Group Discussion with Nursing Staff

3.4.1 Research Questions

- 3.4.1.1 What was the nurses' attitude towards advance directives for CPR in terminally ill patients?
- 3.4.1.2 What were the advance directives preference regarding terminal care for terminally ill patients among nurses?

3.4.1.3 What were the patients' conditions and circumstances when advance directives should be performed or omitted?

3.4.1.4 What was the traditional practice and belief for terminal care in terminally ill patients?

3.4.2 Objectives of the study

3.4.2.1 To introduce the concept of advance directives for terminal care in terminally ill patients in CMU Hospital.

3.4.2.2 To determine the views of nurses whether advance directives can be initiated for terminal illnesses in CMU Hospital and, if so, under what conditions and circumstances.

3.4.2.3 To determine the views of nurses whether advance directives were acceptable for CPR, CPR requiring mechanical ventilation, artificial ventilation, analgesia, artificial hydration and nutrition, and hospitalization.

3.4.2.4 To gain knowledge and understanding of traditional practice and belief for terminal care in terminally ill patients.

3.4.2.5 To give appropriate recommendation(s) regarding the use of advance directives for terminal care in terminally ill patients in CMU Hospital based on sound research results.

3.5 Self-administered Questionnaires for Medical Staff

3.5.1 Research Questions

- 3.5.1.1 What was the physician's attitude towards advance directives for CPR in terminally ill patients?
- 3.5.1.2 What was the percentage of ADs preference regarding CPR for terminally ill patients among physicians?
- 3.5.1.3 What were the patients' conditions and circumstances when advance directives should be performed or omitted?
- 3.5.1.4 What was the traditional practice and belief for terminal care in terminally ill patients?

3.5.2 Objectives of the study

- 3.5.2.1 To introduce the concept of advance directives for terminal care in terminally ill patients in CMU Hospital.
- 3.5.2.2 To determine the views of physicians whether advance directives can be initiated for terminal illnesses in CMU Hospital and, if so, under what conditions and circumstances.
- 3.5.2.3 To determine the views of physicians whether advance directives were acceptable for CPR, CPR requiring mechanical ventilation, artificial ventilation, analgesia, artificial hydration and nutrition, and hospitalization.
- 3.5.2.4 To gain knowledge and understand of traditional practice and belief for terminal care in terminally ill patients.

3.5.2.5 To give appropriate recommendation(s) regarding the use of advance directives for terminal care in terminally ill patients in CMU Hospital based on sound research results.

3.6 Operational Definitions

Brink and Wood (1994) suggested that every variable state in the purpose of the study should be operationally defined. The following terms were defined as:

Advance directive (AD): a treatment decision of patients for health personnel to assist in their terminal care. This decision was made before the actual event occurs. It was introduced by providing an advance directives intervention designed to assist an individual's ability to decide on his/her understanding and preferences of the likely outcomes of cardiopulmonary resuscitation.

Effectiveness of advance directives: the success of the application of advance directives intervention, as measured by cardiopulmonary resuscitation rate performed in terminally ill patient.

Cardiopulmonary resuscitation (CPR): the initiation of artificial ventilation and closed-chest compression for patient who had cardiopulmonary arrest in CMU Hospital.