Purpose/Objectives: To explore oncology nurses’ experiences with receiving requests for assisted dying from terminally ill patients with cancer.

Design: Descriptive, naturalistic.

Setting: RNs who identified themselves as direct care providers or clinical nurse specialist members of the Oncology Nursing Society.

Sample: 40 oncology nurses who responded to a randomized, sequential direct mailing submitted 48 stories for analysis.

Methods: Anonymously submitted written stories analyzed using Denzin’s process of interpretive interactionism.

Main Research Variable: The experience of receiving a request for assisted dying.

Findings: Four main themes emerged from the thematic analysis: Control, Conflict, Covert Communication, and the Enduring Influence. Eleven subthemes included the Cry for Help, Hastening the Process, What If, Managing the Morphine, Countering With Palliative Care, Collision of Values, Sense of Distress, Dialogue Around the Request, Silent Knowing, the Unforgettable, and Reflections on Lessons Learned.

Conclusions: Experiences included a mixture of direct-patient and family requests for pain relief, anticipatory fear of future pain, desire to end life before unacceptable deterioration, family requests to hasten the dying trajectory, and others. Stories reflected the larger societal struggle with desires to control life, health, and the dying process.

Implications for Nursing Practice: Nurses should be prepared to respond to such requests in a compassionate and helpful way that is respectful of both the patient’s and the nurse’s personal values. Diversity of individual values and priorities may trigger some patients to seek assistance in controlling the timing and circumstances of death. Thus, continued study of nurse, patient, and family member experiences with this ethical dilemma is warranted.

Key Points...

➤ Despite ethical and legal prohibitions against deliberate actions to prematurely end a terminally ill patient’s life, oncology nurses receive requests for assisted dying.

➤ A terminally ill patient’s request for assisted dying represents an ethical and legal dilemma for some oncology nurses.

➤ Social, political, and healthcare leaders must promote health policy and research activities designed to improve both the quality of dying in America and the choices available to meet individual preferences for end-of-life experiences.