Parents report end-of-life decisions to be the most difficult treatment-related decisions they face and clinicians perceive the assistance they can offer with these decisions to be inadequate (Hinds et al., 2005). Research offers patient, parents, and clinician’s perspectives as well as insight for nurses and other health care providers to implement standards of care and support throughout the process. Articles were located in CINAHL utilizing key words such as: pediatric oncology, end-of-life, palliative care, ethics, and oncology nursing. The Evidence in all five articles was graded using: The Johns Hopkins Evidence-Rating Scale. (Newhouse, Dearholt, Poe, Pugh & White, 2007).

Each of the five articles contributed to a limited body of knowledge surrounding improving satisfaction outcomes in pediatric end-of-life care decision-making. As a nurse, it is our role to understand the wishes of the patient and their family in order to advocate for them with the rest of the healthcare team, as necessary, to improve satisfaction outcomes and plan patient care accordingly. Hinds et al.’s (2012) study confirms that using a communication intervention helped to improve overall communication amongst the parents and clinicians throughout the decision-making process and may have provided some comfort to the parents after the death of their child as it helped them to fulfill their role of being a ‘good parent’. This study demonstrated that there is an evidence-based need for a communication intervention that nurses can use to help facilitate communication in end-of-life decision-making, plan patient care, and provide support to the patient and their family to improve satisfaction outcomes during this difficult time.