
Download Ebook Partnership With The Dying Where Medicine And Ministry Should Meet

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CAOLO7 - REBEKAH SIDNEY

Includes decisions of the Supreme Court and various intermediate and lower courts of record; May/Aug. 1888-Sept./Dec. 1895, Superior Court of New York City; Mar./Apr. 1926-Dec. 1937/Jan. 1938, Court of Appeals.

In the years 2011, 2012, and 2013, I was met with the loss of several important people in my life. The loss of my loved ones made me reflect about death and dying multiple times. More specifically, I reflected on how our society and local communities approach conversations about the end of life. I became increasingly concerned about the discomfort associated with death. Due to this, I became very interested in recognizing our mortality and using advance care planning to achieve a "good death" if possible. With this interest in mind, I coordinated a community outreach project to promote advance care planning in the Piedmont Triad region of North Carolina. A sub-committee of the "Regional Partnership for Advance Care Planning" was formed with participants from Hospice & Palliative CareCenter, Novant Health, and Wake Forest Baptist Health. This sub-committee met frequently over the course of six months to improve advance care planning in the Piedmont Triad through a new initiative, which we entitled "Got Plans?". This initiative includes a shared website (www.gotplansnc.org), educational materials, community workshops, and other developing resources. This project is a result (and a continuing effort) of many hardworking individuals from Hospice & Palliative CareCenter, Novant Health, and Wake Forest Baptist Health who have worked to overcome significant barriers to make this project a success for

the benefit of our fellow citizens.

What do physicians, nurses, chaplains, and social workers think about moral and religious issues in care for the dying? These professionals live with death, including many untimely and difficult deaths, on a daily basis. Based on intensive interviews with a cross sample of health care professionals, David H. Smith details how the churches could not only be supportive of these primary caregivers in dealing with end of life issues, but how they could enlist their help in informing their own congregations about the realities of death. To care for the dying is spiritually demanding work. Churches should not let health professionals struggle with religious issues—whether of patients, families, or their own—in isolation. Smith's respondents offer powerful perspectives on the issue of physician assisted suicide. Religious and theological ethics cannot afford to ignore insights and questions that come from those who deal with dying every day. Finding meaning in the face of human suffering comes less from doctrine than from living a certain kind of life. This book is a clarion call for new, practical, and vital forms of education, support, and commitment, particularly within the churches, in the cause of improving care for the dying. Visit our website for sample chapters!

Includes reports from the Chancery, Probate, Queen's bench, Common pleas, and Exchequer divisions, and from the Irish land commission.

"Cases argued and determined in the Court of Appeals, Supreme and lower courts of record of New York State, with key number annotations." (varies)