

REVIEW

Nursing attitudes in end-of-life care described by the FATCOD scale: a review of the literature

Actitudes de enfermería en el cuidado de fin de vida descritos por la escala FATCOD: revisión de la literatura

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ABSTRACT

Introduction: attitudes “allows behavioral tendencies to be mobilized through cognitive, emotional and rational components”, being necessary within the development of nursing skills in palliative care, to know the attitudes towards the care of terminally ill people and of their families; worldwide there are several scales, one of them, the Frommelt Attitude Toward Care of the Dying (FADCO) scale, which measures nursing attitudes towards the care of dying patients and their families, which has been validated and used in different countries and languages.

Objective: this study aims to identify nursing attitudes in end-of-life care described by the FATCOD scale.

Method: a review of the literature was carried out, of scientific articles related to research on the FADCO scale, including articles with full text in Spanish, English and Portuguese, published between 1990 and 2022, including quantitative research, case and control studies, clinical trials, cohort studies and cross-sectional studies; A search was carried out in different databases such as virtual health library, OVID Medicine and Nursing, Proquest Family Health Database, Proquest Health & Medical Collection, Proquest Nursing & Allied Health Database, Proquest Public Health Database, among others.

Results: the search for articles was carried out by means of 26 combinations of keywords to give search formulas, the total sample consisted of 40 articles included in the narrative review, finding that 20 % of the countries where the scale was most used was Turkey and China, another important aspect that was evidenced is that according to the culture and beliefs the instrument presented diversity of dimensions and linguistic adaptation according to the country; Regarding the population that was applied, it is distributed among nursing students and professionals with an average age of 36 years, 92 % were women, 95,5 % of the nurses practice some religion while 87,5 % of the students do not report or do not practice. A religion. The respondents have from 1 to 6 years of experience, the students report that only 9,1 % have had contact with death, compared to what was found in the professionals that 65 % of these had training and contact with death experiences, in relation to the scale score for professionals it was 88 points and for students 84 points, which indicates that the attitudes of this group are in a medium range and can be an alert for the academy to strengthen skills in palliative care. necessary for the care of the patient and his family.

Conclusions: it is important to highlight that there are scales or measurement instruments to know the state of preparation and level of competencies that are available to provide quality care. In this narrative review, it was documented that the FATCOD scale has been used in multiple countries with this purpose, highlighting that attitudes modify behavior trends according to their thinking and react in a context protecting their values and beliefs, which translates into attitudes that the professional has to handle a critical situation as it is in different contexts according to their professional profile.

Keywords: Attitude; Palliative Care; End-of-Life Care; Knowledge; FATCOD Scale.

RESUMEN

Introducción: las actitudes “permiten movilizar tendencias de comportamiento a través de componentes cognitivos, emocionales y racionales”, siendo necesario dentro del desarrollo de las competencias de enfermería en cuidados paliativos, conocer las actitudes hacia el cuidado personas terminales y de sus familias; a nivel mundial se cuenta con varias escalas, una de ellas, la es escala Frommelt Attitude Toward Care of the Dying (FADCO) que mide las actitudes de enfermería hacia el cuidado del paciente moribundo y su familia la cual ha sido validada y utilizada en diferentes países e idiomas.

Objetivo: identificar las actitudes de enfermería en el cuidado de fin de vida descritas por la escala FATCOD.

Método: se realizó una revisión de la literatura, de artículos científicos relacionados con investigaciones sobre la escala FADCO, se incluyeron artículos con texto completo en idioma español, inglés y portugués, publicados entre 1990 hasta el 2022, se incluyeron investigaciones cuantitativas, estudios de casos y control, ensayos clínicos, estudios de cohorte y estudios transversales; se realizó búsqueda en diferentes bases de datos.

Resultados: la búsqueda de artículos se realizó por medio de 26 combinaciones de palabras claves para dar fórmulas de búsquedas, la muestra total fue de 40 artículos incluidos en la revisión narrativa encontrando el 20 % de los países donde más se utilizó la escala fue Turquía y china, otro aspecto importante que se evidenció es que de acuerdo a la cultura y creencias el instrumento presentaba diversidad de dimensiones y adaptación lingüística de acuerdo al país; en cuanto a la población que fue aplicada está distribuida en estudiantes y profesionales de enfermería con una edad media de 36 años, el 92 % fueron mujeres, 95,5 % de los enfermeros practican alguna religión mientras que 87,5 % de los estudiantes no informan o no practican una religión. Los encuestados tienen de 1 a 6 años de experiencia, los estudiantes reportan que solo el 9,1 % han tenido contacto con la muerte, comparándolo con lo encontrado en los profesionales que el 65 % de estos tenían formación y contacto con experiencias de muerte, en relación a la puntuación de la escala para los profesionales fue de 88 puntos y para los estudiantes 84 puntos lo cual indica que las actitudes de este grupo están en un rango medio y puede ser una alerta para que desde la academia se fortalezcan competencias en cuidado paliativo necesario para la atención del paciente y su familia.

Conclusiones: es importante destacar que existen escalas o instrumentos de medición para conocer el estado de preparación y nivel de competencias que se tienen para brindar un cuidado de calidad, en esta revisión narrativa se documentó que la escala FATCOD ha sido utilizada en múltiples países con este fin, resaltando que las actitudes modifican tendencias de comportamiento de acuerdo a su pensamiento y reaccionan en un contexto protegiendo sus valores y creencias, que se traduce en actitudes que el profesional posee para manejar una situación crítica como lo es en diferentes contextos de acuerdo a su perfil profesional.

Palabras clave: Actitud; Cuidado Paliativo; Cuidado al Final de la Vida; Conocimientos; Escala FATCOD.

INTRODUCTION

End-of-life care has gained significant relevance in the context of current health systems,^(1,2,3,4,5) due to the progressive aging of the population and the increase in chronic noncommunicable diseases.^(6,7,8,9,10) In this scenario, palliative care is recognized as a growing need that necessitates the intervention of trained professionals, particularly nurses,^(11,12,13,14,15) whose work is crucial in supporting the dying patient and their family.^(16,17,18,19,20) The quality of care offered at this vital stage depends not only on technical knowledge but also on the professional's attitudes,^(21,22,23) communication skills, and ethical sensitivity.^(24,25,26,27)

Several studies have pointed out that the attitudes of health care personnel towards death directly influence the care provided.^(28,29,30,31,32) These attitudes are determined by factors such as academic training,^(33,34,35,36) previous experiences, religious beliefs, sociocultural environment, and previous contact with death.^(37,38,39,40,41) Therefore, it is necessary to explore and understand how these variables affect the behavior of professionals in critical end-of-life situations,^(42,43,44,45,46) to strengthen their preparation during training.^(47,48,49,50)

In response to this need, measurement instruments have been developed, such as the Frommelt Attitude Toward Care of the Dying Scale (FATCOD),^(51,52,53,54,55) which has been widely used internationally to evaluate the attitudes of nursing students and professionals toward the care of terminally ill patients.^(56,57,58,59,60) This tool enables the identification of areas for improvement in attitudinal competencies,^(61,62,63,64,65) contributing to the design of more effective educational strategies.^(66,67,68,69,70,71,72,73)

The purpose of this research was to conduct a review of the scientific literature available in institutional and open databases, aiming to identify the attitudes of nursing personnel towards palliative care, as well as the associated sociodemographic factors and the applicability of the FATCOD scale in various contexts. This work seeks to contribute to the strengthening of palliative care training, promoting the humanization of care, dignity

in the dying process, and the development of competencies that guarantee comprehensive and empathetic care at the end of life.

What are the attitudes of nursing staff towards end-of-life care, and what factors influence them according to the scientific literature?

Objective

To analyze, through a review of the scientific literature, the attitudes of nursing staff towards end-of-life care, identifying the factors that condition them, and evaluating the applicability of the FATCOD scale in different contexts.

METHOD

Design

A literature review was conducted, which involved consulting and extracting information from scientific articles available on the Universidad Cooperativa de Colombia platform regarding the attitudes of healthcare personnel towards palliative care.

Population

The present research was conducted using scientific articles from the databases of the Universidad Cooperativa de Colombia and open-access databases, specifically those related to the Frommelt Attitude Toward Care of the Dying Scale (FATCOD).

Sample

The scientific articles that met the inclusion and exclusion criteria were included in the present study.

Variables

Table 1. Variables

Name	Definition	Nature	Level of measurement
Age	Life span from birth	Quantitative - discrete	Ratio
Sex	Characteristics that define a human being human being	Qualitative - dichotomous	Nominal
Time working in nursing	Time in which you have worked as a nurse as a nurse	Quantitative - discrete	Ratio
Number of patients seen	Patients seen during your working life working life	Quantitative - discrete	Ratio
Years of experience in palliative care	Time spent in the palliative care field palliative care	Quantitative - discrete	Ratio
Hours spent in palliative care	Number of hours spent providing palliative care	Quantitative - discrete	Rationale
Fear/discomfort	Feeling that something is going to happen, either real or imagined real or imagined.	Quantitative - discrete	Reason
Family caregiver	Those people in the family who are responsible for assisting in the activities of daily living for people who are ill or dependent.	Quantitative - discrete	Rationale
Communication	The delivery of information from one person to another, which can be verbal and non-verbal.	Quantitative - discrete	Reason
Family as care	The family group is defined as a unit that provides care support during the course of the disease.	Quantitative - discrete	Ratio
Relationship	They are connections between two or more people, which intervenes in the process of health-illness, where it implies a therapeutic communication between the subject of care, family and nursing staff, it is indispensable in the process as it gives response to the suffering suffered by the sick person.	Quantitative - discrete	Nominal
Active care	Holistic care for people who are ill. holistic assistance to people who are ill.	Quantitative - discrete	Ratio

For this research, variables describing age, sex, working time in nursing, number of patients cared for, years of experience in palliative care, hours spent in palliative care, dimensions such as fear/discomfort, family care, communication, family as caregiver, relationship, active caregiving were taken into account (table 1).

Keywords

In order to carry out the search and selection process of the keywords for the present study, the following words were obtained from the Health Sciences Descriptors (DeCS) and Medical Subject Headings (MeSH) page (figura 1).

Español	Inglés	Portugués	Definición
Actitud <i>Sinónimos:</i> Opiniones	Attitude	Atitude	Una predisposición adquirida y duradera a comportarse de modo consistente en relación con una determinada clase de objetos, o un estado mental y/o neural persistente de preparación para reaccionar ante una determinada clase de objetos, no como ellos realmente son sino como son concebidos.
Actitud del Personal de Salud	Attitude of Health Personnel	Atitude do Pessoal de Saúde	Actitudes del personal de salud hacia sus pacientes, otros profesionales, el sistema de atención médica, etc.
Inteligencia Emocional	Emotional Intelligence	Inteligência Emocional	La capacidad de entender y manejar las emociones y utilizar el conocimiento emocional para mejorar el pensamiento y manejarse

eficazmente con las tareas. Los componentes de la inteligencia emocional son la empatía, automotivación, autoconocimiento, autorregulación, y las habilidades sociales. La inteligencia emocional es una medición de la capacidad para socializar o relacionarse con los demás.

**Estudiantes
de
Enfermería**

**Students,
Nursing**

**Estudantes de
Enfermagem**

Individuos matriculados en una escuela de enfermería o en un programa formal de educación que culmina con el otorgamiento de un grado en enfermería.

Cuidados

Paliativos

Sinónimos:

Apoyo en

Cuidados

Paliativos

Asistencia

Paliativa de

Apoyo

**Palliative
Care**

**Cuidados
Paliativos**

Tratamiento para aliviar los síntomas sin curar la enfermedad. (Stedman, 25a ed)

Atención

Paliativa

Tratamiento

Paliativo

Cuidados Paliativos al Final de la Vida Sinónimos: Cuidado por Desamparo Programas de Cuidados Paliativos Programas de Hospicios	Hospice Care	Cuidados Paliativos na Terminalidade da Vida	Cuidados de salud especializados, de apoyo, que se le prestan a una persona que está agonizando. Con frecuencia se aborda de una manera integral, brindando a los pacientes y sus familiares consejos legales, financieros, emocionales o espirituales, además de atender a las necesidades físicas inmediatas de los pacientes. Estos cuidados pueden ser brindados en el domicilio, en el hospital, en instalaciones especializadas (HOSPICIOS), o en áreas designadas especialmente de instalaciones de cuidados prolongados. El concepto incluye también atención a los familiares en relación el sentimiento de pérdida. (Traducción libre del original:
		Sinónimos: Cuidado Paliativo a Doentes Terminais Cuidados a Doentes Terminais Cuidados de Conforto Programas de Cuidados Intermitentes	

		Programas de Cuidados Paliativos	Dictionary of Health Services Management, 2d ed)
Enfermería de Cuidados Paliativos al Final de la Vida <i>Sinónimos:</i> Enfermería de Cuidados Paliativos		Enfermagem de Cuidados Paliativos na Terminalidade da Vida	Especialidad de la enfermería que se relaciona con el cuidado de los pacientes que enfrentan enfermedades graves o potencialmente mortales. El objetivo de la enfermería paliativa es prevenir y aliviar el sufrimiento, y para apoyar lo mejor posible la calidad de vida de los pacientes y sus familias. La enfermería de hospicio es el cuidado paliativo para las personas en su etapa final de la vida.
	Hospice and Palliative Care Nursing	<i>Sinónimos:</i> Enfermagem de Cuidados Paliativos Enfermagem em Centros de Cuidados Paliativos	
Enfermería de Cuidados Críticos	Critical Care Nursing	Enfermagem de Cuidados Críticos	Una de las especialidades de enfermería que se ocupa específicamente de la atención de pacientes que están gravemente enfermos.

Autonomía Profesional	Professional Autonomy	Autonomia Profissiona	La calidad o condición de ser independiente y autodirigido, especialmente en la toma de decisiones, que permite a los profesionales ejercer su criterio según lo que entiendan adecuado en el desempeño de sus trabajos.
Educación en Enfermería	Education, Nursing	Educação em Enfermagem	Se usa para cosas en general que se relacionan con la educación en enfermería.
Miedo <i>Sinónimo:</i> Temor	Fear	Medo	Una respuesta afectiva a un peligro externo real, que desaparece con el fin de la situación amenazadora.
Calidad de Vida <i>Sinónimos:</i> Calidad de Vida en Relación con la Salud Calidad de Vida	Quality of Life	Qualidade de Vida	Concepto genérico que refleja preocupación por la modificar y mejorar las condiciones de vida, por ejemplo, físico, político, moral, entorno social, así como la salud y la enfermedad.

Relacionada

con la Salud

CVRS

HRQOL

Muerte

Sinónimos:

Determinación

de la Muerte

Experiencia

Cercana a la

Muerte

Fallecimiento

Fin de la Vida

Muerte

Cardíaca

Óbito

Death

Morte

Cese irreversible de todas las funciones corporales, se manifiesta por ausencia de respiración espontánea y pérdida total de las funciones cardiovascular y cerebral.

Dolor

Sinónimos:

Sufrimiento

Físico

Pain

Dor

Sensación desagradable inducida por estímulos nocivos que son detectados por las TERMINACIONES NERVIOSAS de los NOCICEPTORES.

Enfermo

Terminal

Terminally Ill

Doente Terminal

Personas con una enfermedad incurable o irreversible en la etapa

			final que lo conducirá a la muerte en poco tiempo.
Cuidado			
terminal			Cuidados médicos y de enfermería
Sinónimos:	Terminal care	Assistência	dados a pacientes en la fase terminal
Cuidado en el		Terminal	de una enfermedad.
final de la			
vida			
Enfermeros y	Nurses	Enfermeiras e	
Enfermeras		Enfermeiros	
Sinónimos:	Sinonimos:		
Enfermera		Sinonimos:	Profesionales calificados graduados
Registrada	Nurse		de una escuela acreditada de
Enfermera y	Nurse,	Enfermeira	enfermería y por el paso de un
Enfermero	Registered	Enfermeira e	examen nacional de concesión de
Enfermeras	Nurses,	Enfermeiro	licencias para la práctica de
Enfermeras	Registered	Enfermeira	enfermería. Ellos proporcionan
Registradas	Nursing	Registrada	servicios a los pacientes en la
Enfermero	Personnel	Enfermeiras	recuperación o el mantenimiento de
Registrado	Personnel,	Enfermeiras	su salud física o mental.
Enfermero y	Nursing	Registradas	
Enfermera	Registered	Enfermeiro e	
Enfermeros	Nurse	Enfermeira	
Registrados	Registered	Enfermeiro	
Enfermeros y	Nurses	Registrado	
Enfermeras		Enfermeiros e	
		Enfermeiras	
		Enfermeiros	
		Registrados	

Figure 1. DeCS and MeSH Descriptors

Combination with Booleans

Fórmulas español	Fórmulas inglés	Fórmulas portugués
Actitud OR Opiniones AND	Attitudes AND Attitudes to	Medo OR temer AND
Actitud del Personal de Salud	Death AND Attitude of	Cuidados Paliativos na
AND cuidado paliativo AND	Health Personnel AND	Terminalidade da Vida
escala FATCOD	Hospice and Palliative Care	AND atitude frente a morte
	Nursing AND FATCOD	AND Estudantes de
	scale	Enfermagem AND escala
		FATCOD
Cuidados Paliativos OR Apoyo	Palliative Care AND	Morte OR morte AND
en Cuidados Paliativos OR	Hospice Care AND Hospice	Cuidados Paliativos AND
Asistencia Paliativa de Apoyo	and Palliative Care Nursing	Enfermagem de Cuidados
AND escala FATCOD	AND FATCOD scale	Críticos AND escala
		FATCOD
Enfermo Terminal AND	Fear AND End-Of-Life OR	Dor OR Sofrimento AND
Enfermería de Cuidados	Death AND Students,	Cuidados Paliativos AND
Paliativos al Final de la Vida	Nursing AND FATCOD	Educação em Enfermagem
AND escala FATCOD	scale	AND escala FATCOD
Dolor OR Sufrimiento Físico	Critical Care Nursing AND	Cuidados Paliativos OR
AND escala FATCOD	Professional Autonomy	apoio em cuidados
	AND Terminally Ill AND	paliativos AND Educação
	FATCOD scale	em Enfermagem AND
		escala FATCOD
Programas de Cuidados	Attitude to Death OR Death	Atitude OR opiniões AND
Paliativos AND Actitud del	Attitudes AND Critical Care	Atitude Frente a Morte
Personal de Salud AND Muerte	Nursing AND Hospice Care	AND Estudantes de
AND escala FATCOD	AND FATCOD scale	Enfermagem AND escala
		FATCOD
Atención Paliativa OR	Quality of Life OR Health-	Atitude Frente a Morte
Tratamiento Paliativo AND	Related OR Life Quality	AND Estudantes de
Actitud Frente a la Muerte AND	AND Terminally Ill AND	Enfermagem AND
escala FATCOD	Palliative Care AND	

	Education Nursing AND FATCOD scale	Autonomia Profissional AND escala FATCOD
Cuidados Paliativos al Final de la Vida OR Cuidado por Desamparo OR Programas de Cuidados Paliativos OR Programas de Hospicios AND escala FATCOD	Near-Death Experience AND Students Nursing AND Critical Care Nursing AND FATCOD scale	Qualidade de Vida em relação à saúde AND medo AND cuidados paliativos AND escala FATCOD
Enfermería de Cuidados Críticos AND Actitud Frente a la Muerte AND escala FATCOD	Quality of Life AND Pain AND Palliative Care AND Attitude of Health Personnel AND FATCOD scale	Inteligência Emocional AND Atitude Frente a Morte AND Atitude do Pessoal de Saúde AND escala FATCOD
Calidad de Vida en Relación con la Salud AND Actitud del Personal de Salud AND escala FATCOD	Quality of Life AND Terminally Ill AND FATCOD scale	Morte AND Inteligência Emocional OR assistência paliativa AND escala FATCOD
Muerte OR Determinación de la Muerte OR Experiencia Cercana a la Muerte OR Fallecimiento AND escala FATCOD	Emotional intelligence AND attitude to death AND hospice and palliative care nursing AND FATCOD scale	Estudantes de Enfermagem AND Atitude Frente a Morte AND Doente Terminal AND escala FATCOD

Dolor OR Sufrimiento AND	Palliative care OR palliative	Atitude Frente a Morte
Actitud del Personal de Salud	treatment AND terminally	AND Estudantes de
AND escala FATCOD	Ill AND critical care nursing	Enfermagem AND
	AND FATCOD scale	Autonomia Profissional
		AND escala FATCOD
Enfermo Terminal and	Professional autonomy	Doente Terminal AND
Determinación de la Muerte and	AND attitude of health	Enfermagem de Cuidados
Miedo and Actitud Frente a la	Personnel AND critical care	Críticos AND Cuidados
Muerte AND escala FATCOD	nursing AND FATCOD	Paliativos na Terminalidade
	scale	da Vida AND escala
		FATCOD
Estudiantes de Enfermería AND	Terminally Ill AND aches	Dolor OR fornecer AND
Actitud Frente a la Muerte AND	AND quality of life AND	Atitude do Pessoal de Saúde
Asistencia Paliativa de Apoyo	palliative supportive Care	AND escala FATCOD
AND escala FATCOD	AND FATCOD scale	
Actitud Frente a la Muerte AND	Attitude of health personnel	Atitude Frente a Morte
Estudiantes de Enfermería AND	AND professional autonomy	AND Atitude do Pessoal de
Autonomía Profesional AND	AND education, nursing	Saúde AND enfermeiros e
escala FATCOD	AND FATCOD scale	enfermeiros AND escala
		FATCOD

Calidad de Vida en Relación con la Salud AND Temor and Cuidados Paliativos AND escala FATCOD	Attitudes AND terminally Ill AND attitude to death AND FATCOD scale	enfermeiros e enfermeiros AND Atitude do Pessoal de Saúde AND Enfermagem de Cuidados Paliativos na Terminalidade da Vida AND escala FATCOD
Enfermería de Cuidados Paliativos al Final de la Vida AND Actitud Frente a la Muerte AND escala FATCOD	Treatments, palliative AND attitude AND hospice and palliative care nursing AND FATCOD scale	Enfermeiros e enfermeiros AND Cuidados Paliativos na Terminalidade da Vida AND escala FATCOD
Enfermería de Cuidados Paliativos al Final de la Vida AND Apoyo en Cuidados Paliativos OR Asistencia Paliativa de Apoyo AND escala FATCOD	Supportive care palliative AND bereavement care AND terminally Ill AND FATCOD scale	Assistência Terminal AND Enfermeiros e enfermeiros AND Qualidade de Vida AND escala FATCOD
	Terminally Ill AND burning pain AND fear AND death AND FATCOD scale	Educação em Enfermagem AND Enfermeiros e enfermeiros AND Enfermagem de Cuidados

	Críticos AND escala FATCOD
Nurse AND attitude of health personnel AND palliative treatment AND FATCOD scale	Enfermagem de Cuidados Críticos AND Qualidade de Vida AND Enfermagem de Cuidados Críticos AND escala FATCOD
Attitudes AND personnel nursing AND death OR end Of life AND FATCOD scale	Doente Terminal AND Cuidados Paliativos na Terminalidade da Vida AND escala FATCOD
Registered nurse OR nursing personnel AND attitude to death AND terminally Ill AND FATCOD scale	Atitude Frente a Morte AND Atitude do Pessoal de Saúde AND escala FATCOD
Critical care nursing AND terminally Ill AND fear AND cardiac death AND FATCOD scale	Enfermeiros e Enfermeiros AND Educação em Enfermagem AND Enfermagem de Cuidados Paliativos na Terminalidade da Vida AND escala FATCOD

Determination of death OR	Cuidados Paliativos AND
near-death experience AND	Doente Terminal AND
terminally Ill AND	Qualidade de Vida AND
FATCOD scale	escala FATCOD
Hospice and palliative care	Cuidados Paliativos na
nursing AND critical care	Terminalidade da Vida
nursing AND terminally Ill	OR Cuidados de Conforto
AND FATCOD scale	AND Enfermagem de
	Cuidados Críticos AND
	escala FATCOD
Fear AND terminally Ill	Atitude Frente a Morte
AND near-death experience	AND Autonomia
AND FATCOD scale	Profissional AND Educação
	em Enfermagem AND
	escala FATCOD

Figure 2. Combination with Booleans

For the present research, the Boolean connectors AND and OR were used to construct the formulas used for the search, as shown in figure 2.

Sources of information

Institutional databases: the university's databases were consulted, such as the virtual health library, OVID Medicine and Nursing, Proquest Family Health Database, Proquest Health & Medical Collection, Proquest Nursing & Allied Health Database, Proquest Public Health Database, Health Journals and Books Visibility, Proquest Education Database, Proquest India Database, Proquest Latin America & Iberia Database, Proquest Middle East & Africa Database, Proquest Psychology Database, Proquest Research Library, Proquest Science Database, Proquest Social Science Database, Proquest UK & Ireland Database, Redalyc, Dialnet, Oxford, Proquest Central, Sage Journals, Science Direct, Springer journal, Taylor & Francis, Scopus.

Open databases: once the search in the university databases was completed and the necessary saturation of articles was not achieved, a search of open databases, such as Google Scholar, Scielo, and PubMed, was carried out.

Selection

First, the variables and descriptors previously identified as referents for the search were taken into account as inclusion and exclusion criteria.

Inclusion criteria

Language: articles were included whose full text was in Spanish, English, and Portuguese.

Time range: articles were included from 1990 to the present, since the application of this scale has been reported since that time.

Type of publication: quantitative articles, such as case-control studies, clinical trials, cohort studies, and cross-sectional studies, were included in the search.

Exclusion criteria

Open Access articles were excluded.

Inclusion

After applying inclusion and exclusion criteria, a search was made in the databases described above, after which the articles were exported to the bibliographic reference manager “Mendeley” to eliminate possible identical articles among the results, with this process articles were selected that were reviewed in full for their inclusion in this study and subsequent analysis.

Analysis of the information

Using the previously selected articles, a complete reading of the text was performed, extracting the necessary information that was stored in a database created by the researchers which contained the following items: name of the article, journal in which it was published, author or authors, date of publication, country, field of performance, general objective and specific objectives, study design, population, sample, methodology, instruments used, to describe the attitudes and knowledge of nurses in critical services.

Ethical Aspects

According to regulation 008430 of 1993, article 11, this research is classified as “no risk” research because “no type of intervention will be carried out, it will be a review of the literature” (Ministry of Health, 1993).

RESULTS

For this narrative review the search for articles was carried out using 26 combinations of key words to give search formulas described above, the articles investigated on the subject matter in this narrative review were found distributed in each database as follows: Redalyc with 0,77 % (5392), Dialnet with 6 % (43), Google academic with 0,20 % (1474), Proquest Central 73 % (516), Pubmed Central 13 % (93), other databases 11 % (83 420), yielding a total of 703 011 articles (100 %), of which were included and excluded according to the criteria set out in the methodology of this literature review, resulting in a total of 40 articles corresponding to 100 % of which finally for the databases were found with: Redalyc with 12,5 % (5), Dialnet with 7,5 % (3), Google academic 22,5 % (9), Proquest Central 35 % (14), Pubmed Central 15 % (6), other databases.

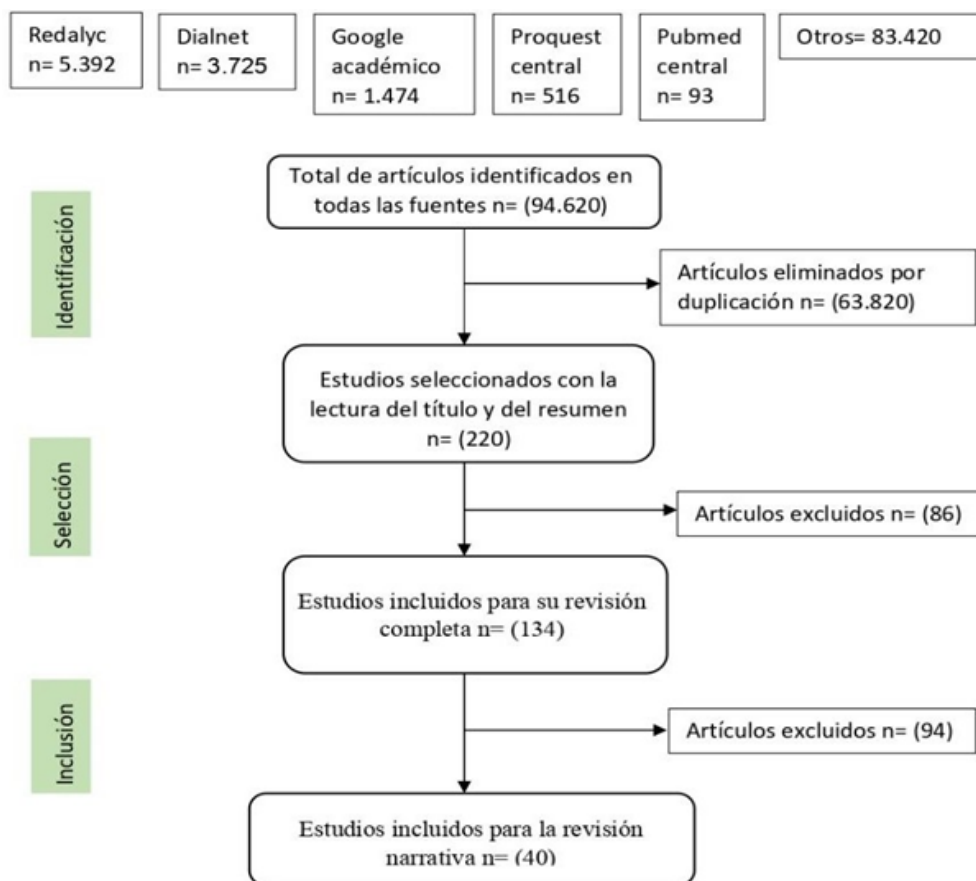


Figure 3. Flowchart of data databases 7,5 % (3), as shown in the flowchart

Of the 40 articles reviewed, the highest prevalence was found between 2019 and 2022, with 10 % (4) corresponding to 2019, 17,5 % (7) corresponding to 2020, 17,5 % (7) to 2021, and 12,5 % (5) to 2022. (7) 2021 and 12,5 % (5) for the year (2022). According to the countries with the highest publication of articles, the top three were: Turkey (10 %, 4), China (10 %, 4), followed by Italy (7,5 %, 3) and Spain. 7,5 % (3), Sweden 5 % (2), South Korea 5 % (2), United States 5 % (2), Japan 5 % (2), Australia 5 % (2); and ending with those countries with the lowest number of publications, among them Iran, Greece, Egypt, Switzerland, Nigeria, Vietnam, Mongolia, Indonesia, Poland, Chile, United Kingdom, Israel, Africa, India with 55 % (1). On the other hand, 100 % (40) of the articles reviewed in the following table are the most outstanding findings.

Description of findings

According to the literature review, this scale has been applied to professional nurses and nursing students; for students, the results were as follows: the average age was 33 years, and the sex of the participants was predominantly female, with 83. As for religion, 71 % of them were Catholics, 57 % of them had had training in palliative care, and their attitudes were favorable, with a score of 103 on the scale in the care of the patient and family in a palliative situation, see table 2.

Table 2. Results of sociodemographic variables and FATCOD scale in students	
Findings	References
Students' ages ranged from 17 to 49 years old.	(2,3,4,5,6,7,8,9,10,11,12,13,14,15)
In terms of gender, females predominate in a range between 73,2 % and 92,9 %.	(2,3,4,5,6,7,8,9,10,11,12,16,13,14,15)
Only four articles asked about religion and in three of them the Catholic religion predominates with a range between 61 % and 81 %.	(2,5,6,14)
Only three articles asked whether they received pre-death education with a range between 39,46 % and 74 %.	(2,6,9)
A FATCOD scale score was found to be between 74,69 and 132 points.	(2,3,4,5,6,7,8,9,10,11,12,13,14,15,16)

Table 3. Results of sociodemographic variables and FATCOD scale in professionals	
Findings	References
Within the review it was found that ages ranged from 16 to 67 years.	(17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37)
In terms of gender, females predominate with a range of 56,3 % and 98,6 %.	(17,19,20,21,22,23,24,25,26,27,28,29,30,31,33,34,35,36)
Only six articles asked about religion and in 2 articles it mentions that Buddhism was professed with 56,9 % and Jewish with 89 %.	(21,24,26,29,32)
The remaining only mentioned that they professed a religion, but did not specify which one religion, but did not specify which one.	
In 8 items the marital status was asked, where 7 items responded that they were married, ranging from 51,8 % to 78,7 %.	(19,21,25,26,29,31,32,37)
It was found that 10 articles questioned work experience, of which 6 articles were nursing graduates with a range of 45,4 % and 85,4 %; in 4 articles it mentions that they were pursuing a postgraduate degree.	(24,25,29,31,32,33,35,36)
A score was found to be between 51,173 and 125,7 points.	(17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37)

As for the professionals, it was found that the average age of 41,5, 77 % of the interviewees were female, 15 % of the reviewed articles ask about religion and 5 % of the articles mentioned professing Buddhism with and Jewish, the remaining 95 % only mentioned professing a religion, but did not specify which one, 20 % of the articles in the narrative review questioned the population studied on marital status, 65 % being married, 65 % of the professionals selected for the studies had experience in the area of palliative care for them the scale was favorable with a mean of 88, this being attributed to administrative and legal functions and work overload.

Table 4. Results of sociodemographic variables and FATCOD scale in professionals and students

Findings	References
The ages of the students and professionals ranged from 23 to 49 years old.	(38,39,40,41)
In terms of sex, females predominate in a range of 87 % to 98 %.	(38,39,40,41)
Only one article asked the practice of any religion 95,5 % of the nurses practice a religion and 87,5 % of the students do not practice a religion.	(38)
Only one article asked the degree of study 53,9 % of the nursing students were pursuing a graduate degree.	(38)
Respondents had from 1 to 16 years of work experience.	(38,40,41)
Only in one article if they had education prior to death between 9,1 % and 60,4 %.	(38)
It was found a score between 29,96 and 139,20 points.	(38,39,40,41)

In the studies that included students and professionals, the mean age of the population studied was 36 years. The sample consisted of 92 % women. Nurses practiced some form of religion, with 95,5 % of the nurses identifying as practicing a religion. In contrast, 87,5 % of the students did not report or practice a religion. The respondents have 1 to 6 years of experience. If they have had contact with death 9,1 % of the students, and 60,4 % of the professionals when comparing the score of these two groups it is evident that it found a score of 84 which indicates that the attitudes of this group are in a medium range and can be an alert for the academy to strengthen competencies in palliative care necessary for the care of the patient and his family.

CONCLUSIONS

In this narrative review it was documented that the FATCOD scale has been used in multiple countries for this purpose, highlighting that attitudes modify behavioral tendencies according to their thinking and react in a context protecting their values and beliefs, which is translated into attitudes that the professional has to handle a critical situation as it is in different contexts according to their professional profile.

For the nursing discipline, the specific competencies that professionals need in their daily practice are essential. According to the narrative review carried out, it was concluded that the services where the FATCOD scale has been most applied are the palliative care and intensive care unit areas.

Based on geographical location, the continent where the FATCOD scale has been applied and used most is Asia, followed by Europe, making it essential to apply it in the rest of the world.

RECOMMENDATIONS

For future research, the FATCOD scale measurement should be considered for the training needs of nursing students and professionals regarding end-of-life care competencies, to identify potential training gaps.

Likewise, it is recommended that future research using the FATCOD scale considers conducting analyses associated with the usefulness of the educational content provided on end-of-life care during the student stage, with the aim of the consolidation of this knowledge from the academy.

It is necessary to validate the FATCOD scale in Colombia to develop contextualized research evaluating attitudes towards end-of-life care. This will provide reliable theoretical support for designing educational strategies that promote curriculum improvement for both nurse-in-training and professional nurses.

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FINANCING

None.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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