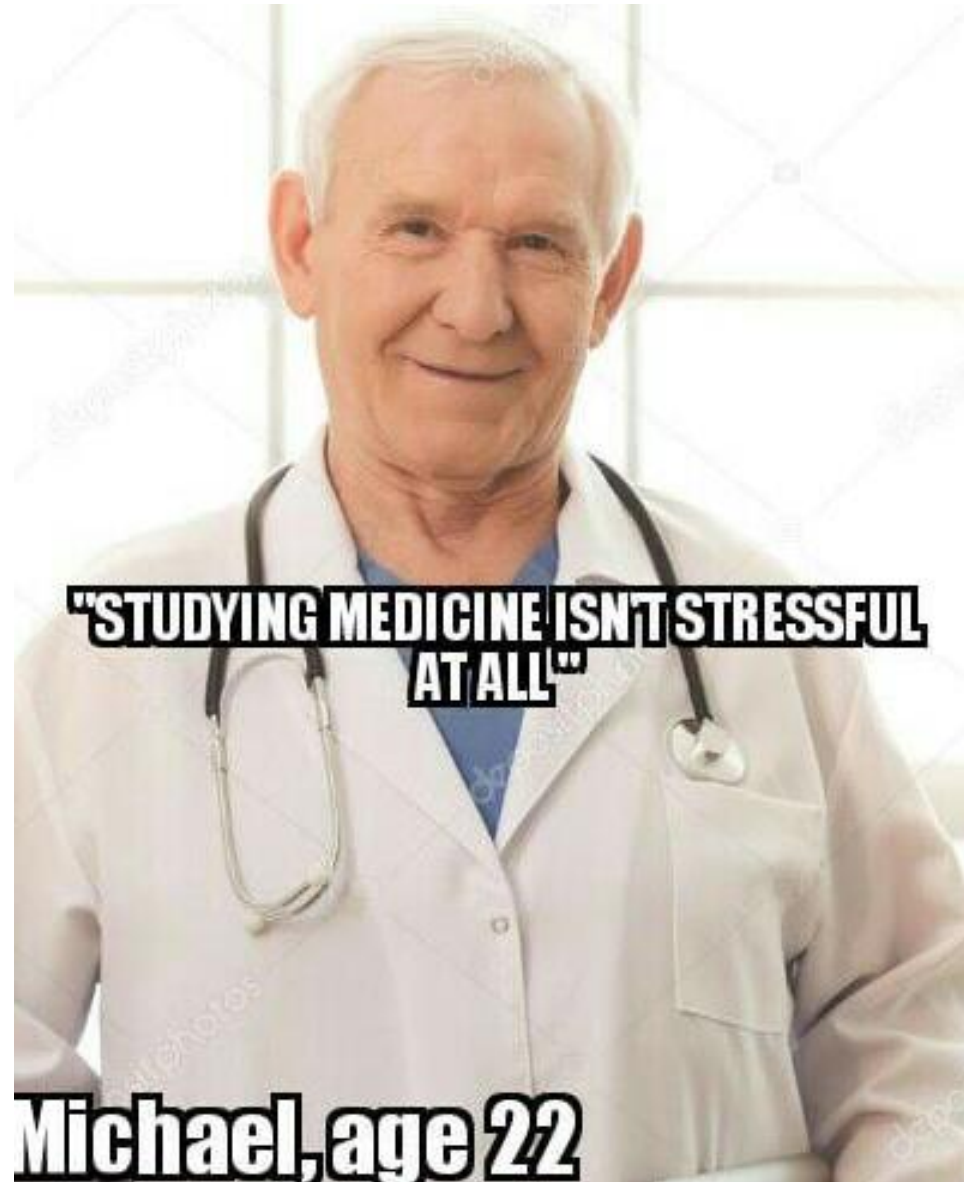


PALLIATIVE MEDICINE TIPS & TRICKS FOR EM & TRAUMA TEAMS

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Denver Health Palliative Medicine

WHAT'S THE HARDEST THING
YOU DO?



Get 5 things to get from this talk

1. What's Palliative Medicine? Hospice?
2. How do you find out about goals? Find out about THE PERSON.
3. When in doubt, offer a time trial.
4. Address emotion to move someone forward cognitively.
5. How we respond to impossible questions

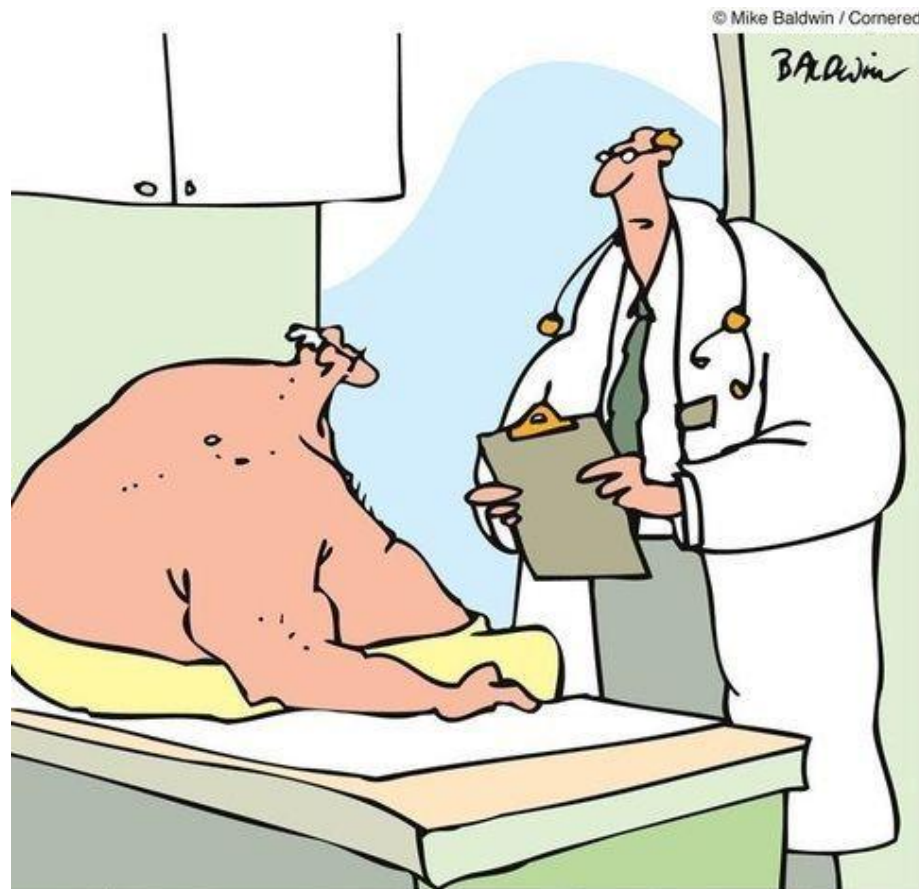
#1: Palliative Medicine

WHAT WE DO

- Refractory symptom management from serious, progressive illness
- Expert prognostication
- Help patients live LONGER AND BETTER when providing concurrent care with Oncologists
- Complex family meetings
- Complex communication
- Help teams feel better about incapacitated patients making bad life choices

WHAT WE DON'T DO

- Chronic pain management
- Psychiatric care
- Counseling
- Hospice
- “Make them choose less.”



“You’ve got six months, but with aggressive treatment we can help make that seem much longer.”

If a patient is enrolled in Hospice:

- Hospice: A PHILOSOPHY & SERVICE of comfort-focused care in last predicted 6 months of life
- Help with:
 - symptom management
 - supplies
 - social work
 - grief (including families)
 - additional goals of care
- Cover treatment related to enrolling diagnosis and related diagnoses

If a patient is enrolled in Hospice:

- They're no longer seeing Palliative Medicine
- Hospice is NOT 24/7 caregiving
- Hospice is NOT a place to live
- Strict criteria for inpatient hospice placement

#2: How do I figure out “Goals?”

I ask about THEM/THEIR FAMILY/THEIR FRIENDS:

“What’s a good day for you?”

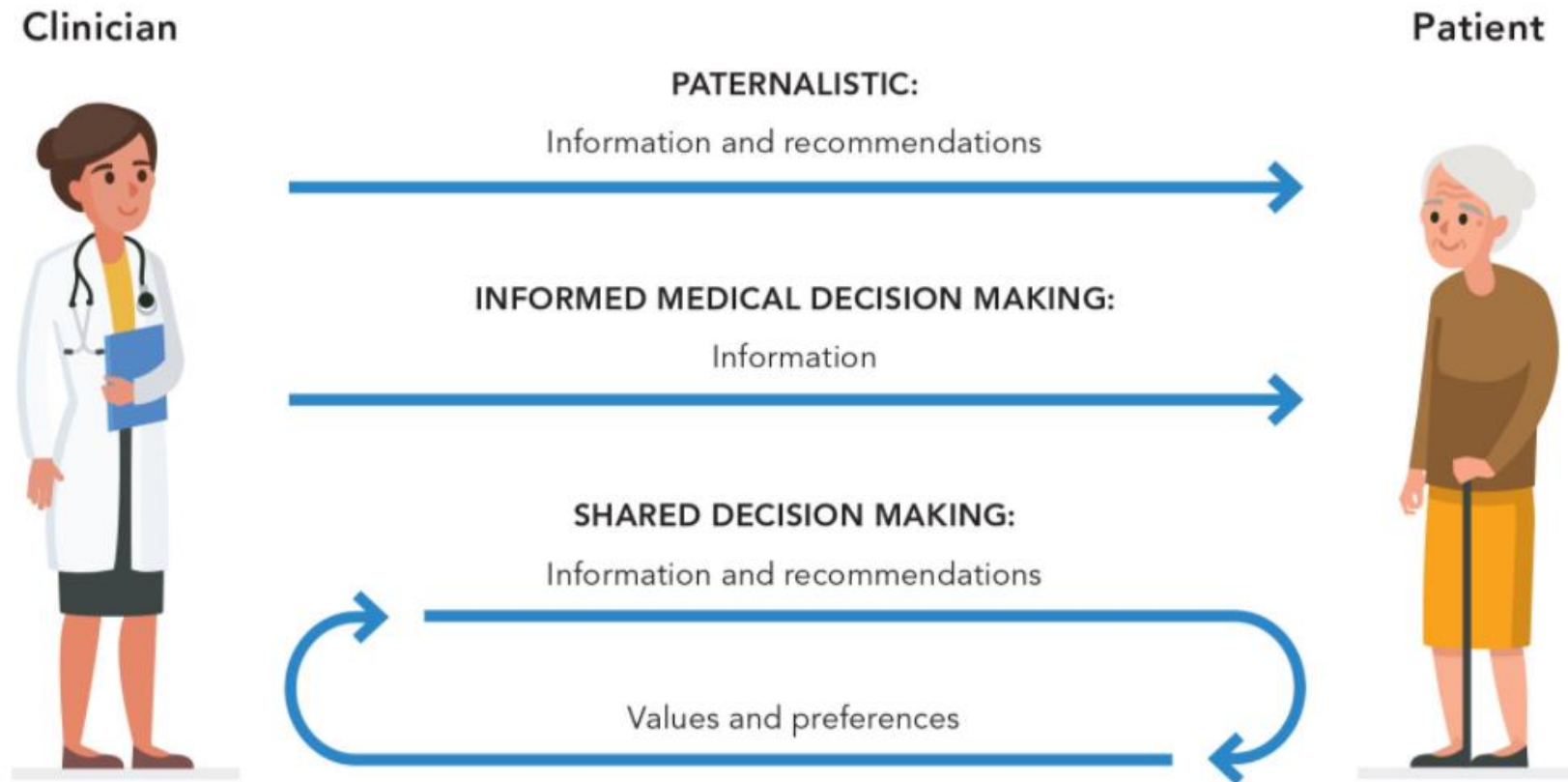
“What’s important to know to take good care of you?”

“Have you ever seen a loved one go through serious illness? What did you think was good? What did you not like about that experience?”

“What are you worried about?”

I take their responses and pull out the values that I hear.

Shared Decision Making: Matching Medical Treatment to Stated Values



Did someone
just say "trach and
PEG"?



You know it's
goals before
holes right?

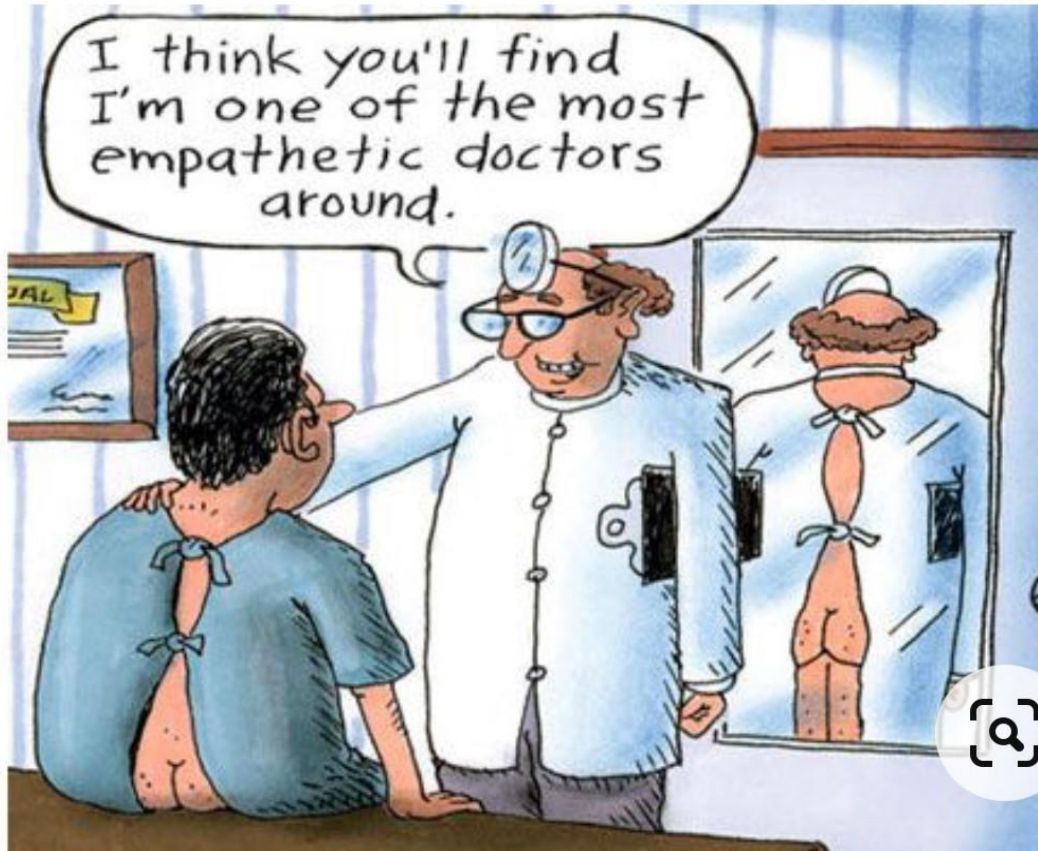


#3: Time Trials



- Enormously helpful when prognosis is unclear
- As the medical team, YOU need to think about:
 - How long?
 - What does recovery look like?
 - What does decline look like?

#4: Addressing Emotion



RESPONDING TO EMOTION					
Naming	Understanding	Respecting	Supporting	Exploring	"I Wish"
This must be... <ul style="list-style-type: none"> • Frustrating • Overwhelming • Scary • Difficult • Challenging • Hard 	What you just said really helps me understand the situation better.	I really admire your <ul style="list-style-type: none"> • Faith • Strength • Commitment to your family • Thoughtfulness • Love for your family 	We will do our very best to make sure you have what you need.	Could you say more about what you mean when you say... <ul style="list-style-type: none"> • I don't want to give up • I am hoping for a miracle 	I wish we had a treatment that would cure you (make your illness go away). *[Remember we do have palliative treatments to offer the patient]
I'm wondering if you are feeling ... <ul style="list-style-type: none"> • Sad • Scared • Frustrated • Overwhelmed • Anxious • Nervous • Angry 	This really helps me better understand what you are thinking.	You (or your dad, mom, child, spouse) are/is such a strong person and have/has been through so much.	Our team is here to help you with this.	Help me understand more about....	I wish I had better news.
It sounds like you may be feeling ...	I can see how dealing with this might be ... <ul style="list-style-type: none"> • hard on you • frustrating • challenging • scary 	I can really see how (strong, dedicated, loving, caring, etc.) you are.	We will work hard to get you the support that you need.	Tell me more...	I wish the situation were different.
In this situation some people might feel ...	I can see how important this is to you.	You are such a (strong, caring, dedicated) person.	We are committed to help you in any way we can.	Tell me more about what [a miracle, fighting, not giving up, etc.] might look like for you?	I wish that for you too. [In response to what a patient or family members wishes, such as a miracle]
I can't even imagine how (NAME EMOTION) this must be.	Dealing with this illness has been such a big part of your life and taken so much energy.	I'm really impressed by all that you've done to manage your illness (help your loved one deal with their illness).	We will go be here for you.	Can you say more about that?	I wish we weren't in this spot right now.

#5: Impossible Questions

WHAT'S THE HARDEST THING A PATIENT OR FAMILY MEMBER
HAS EVER SAID TO YOU?

“What’s his life even going to look like?”



“She’s a real fighter.”



“Isn’t there anything else you can do?”



“We know God will bring us a Miracle.”



“Are you telling me he’s dying?”



*****RESPONSES TO CHALLENGING QUESTIONS*****

<p>God's going to bring me a miracle:</p> <ul style="list-style-type: none"> • I hope that for you, too. (Remember: no buts!) (SUPPORTING) • I really admire and respect your faith (RESPECTING) • Having faith is very important. (RESPECTING) • Can you share with me what a miracle might look like for you? (EXPLORING) 	<p>How much time do I have left?</p> <p><i>NOTE: This question may mean many things – they are scared, they want to know so they can plan, they are suffering, etc. Exploring what they want to know can be very helpful.</i></p> <ul style="list-style-type: none"> • That is a great question. I am going to answer it the best that I can. Can you tell me what you are worried about? (EXPLORING) • That is a great question. I am going to answer it the best that I can. Can you tell me what information would be most helpful to you? (EXPLORING) 	<p>Are you saying there is nothing more you can do?</p> <ul style="list-style-type: none"> • I can't even imagine how (NAME EMOTION) this must be. (NAMING) • It sounds like you might be feeling ... (NAMING/EXPLORING) <ul style="list-style-type: none"> ○ Alone ○ Scared ○ Frustrated ○ Etc. • I wish we had a treatment that would cure you. Our team is here to help you through this. (SUPPORTING)
<p>Are you telling me my dad is dying?</p> <p><i>NOTE: These responses will affirm the question empathically – so do not use them if the patient is not dying.</i></p> <ul style="list-style-type: none"> • I wish I had better news. • This must be such a shock for you. (NAMING) • I can't even imagine how difficult this must be. (UNDERSTANDING) 	<p>Are you giving up on me?</p> <ul style="list-style-type: none"> • I wish we had more curative treatments to offer. Our team is committed to help you in every way we can. (SUPPORTING) • We will be here for you. (SUPPORTING) • It sounds like you might be feeling ... (NAMING/EXPLORING) <ul style="list-style-type: none"> ○ Alone ○ Scared ○ Etc. • We will work hard to get you the support that you need. (SUPPORTING) 	<p>My dad is a fighter!</p> <ul style="list-style-type: none"> • He is. He is such a strong person and he has been through so much. (RESPECTING) • I admire that so much about him. (RESPECTING) • I really admire how much you care about your dad. (RESPECTING) • It must be (NAME EMOTION) to see him so sick. (NAMING) • Tell me more about your dad and what matters most to him. (EXPLORING)

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The End: DEBRIEFING

- YOU ARE LEADERS
- Check in on yourself
- Check in on those around you

**DO NOT BE DAUNTED BY THE ENORMITY
OF THE WORLD'S GRIEF. DO JUSTLY,
NOW. LOVE MERCY, NOW. WALK
HUMBLY, NOW. YOU ARE NOT
OBLIGATED TO COMPLETE THE WORK,
BUT NEITHER ARE YOU FREE TO
ABANDON IT.**



-THE TALMUD

Withdrawal of Ventilator (when patient is not improving; remember, we never “withdraw care”)

Discussion Step	Sample Script
Get ready [provide a warning shot]	"Would it be okay if we talk now? (<i>I've heard from the triage committee.</i>) I'm afraid that this will be a hard conversation."
Understand what they know	"You talked to my colleague yesterday, do I have that right? What did you take away from that conversation?"
Inform with a headline	"I have some serious news. His condition has worsened to the point where I'm afraid he's dying. We are recommending that we remove the ventilator and allow for a natural/peaceful/comfortable death."
Deepen [respond to emotion]	"I wish things were different. I can't imagine what this is like. I can see how much you care about him. I suspect that you never expected the end of his life to come like this."
Equip	"I want you to know that we can make sure he is comfortable. We will pay close attention to shortness of breath, or any other signs of discomfort, and give medications and other treatments that enable him to die peacefully. I want you to know that we are here to support you through this. We will find a way for you to be with him, even if it is by tablet or phone, so that you can say anything you want to say. I'll be right here with you."

On Transfer to ICU (discussing time-limited trials) snip

Discussion Step	Sample Script
Tell the truth about the problem and prognosis [consider outlining expected prognosis using the COVID-19 Prognostication Guide]	"I know this is a scary situation; I'm worried myself. This virus is so deadly that even if we go to the ICU, I'm not sure she will survive. We need to be prepared that she could die. We will do everything we can including a trial of support with a breathing machine."
Identify specific measures for improvement [consider daily SOFA scoring]	"We will be monitoring continuously for improvement on the breathing machine. Specifically we are looking at a measure of how sick she is overall (lungs, heart, kidneys, brain) each day."
Make time interval clear	"We will reassess in [] days. If she gets worse in the meantime despite all our best treatments, our team will be honest. Because we are in an extraordinary time, we would not be able to continue the breathing machine but instead would focus on keeping her comfortable for whatever time remains."
Extubate or Extend time trial	<p>"We are seeing some improvement and need to decide whether to continue this level of support for another [] days. That said, the longer it takes her to recover, the higher the chances that she will take a turn for the worse. We will still need to be prepared that she may die. I know that is hard to hear."</p> <p>"I'm so sorry that her condition has gotten worse, even though we are doing everything. Because we are in an extraordinary time, we are following special guidelines and we cannot continue to provide critical care to patients who are not getting better. This means that we need to accept that she will die, and that we need to take her off the breathing machine. I wish things were different."</p>