Palliative/End of Life Care Rotation

**Description:** This experience occurs over a four week rotation. Geriatric fellows will spend 4 weeks on VA Inpatient Palliative Care Consults & VA Palliative Care Clinic with Dr. LoConte (Wed AM – A Clinic) and 2 weeks with Agrace Hospice Care, Inc.

Supervisor at VA: **Dr. Matt LoConte, Dr. Wendy Adams**

Supervisor contact information:
- Phone: 280-7000
- Pager: 3272, 4852

Contact at Agrace: **Sandi Everson 327-7303**

**Goals**
To provide the geriatric fellow the opportunity to gain a core base of knowledge, refine attitudes and develop skills to improve competence in caring for people at the end of life.

**Objectives and Steps to Evaluate Competency in this Objective**

*The fellow will be able to*

**(Medical Knowledge)**
- Clarify the role of the physician & members of the hospice care team in end of life care.
- Understand the course of chronic illnesses and the difficulty in predicting when death will occur
- Recognize the clinical parameters associated with end-stage disease in CHF, COPD, renal disease and cancer

*As measured by* 1) performance on in-service examination at seven months (target is score >80% on items specific to this objective), 2) global rating scales completed by faculty mentors at the end of the rotation

**(Patient Care)**
- Enhance knowledge and skills to manage pain and other physical symptoms (e.g. dyspnea, constipation, nausea, delirium) that occur during palliative/terminal care.
- Become comfortable addressing the physical and emotional needs of actively dying patients and their families

*As measured by* 1) global rating scales completed by faculty mentors at the end of the rotation

**(Interpersonal and Communication Skills)**
- Gain experience in the advanced care planning process through participation in goal-setting discussions with patients and families, with a particular focus on becoming aware of the limitations of treatment
- Learn to deliver bad news using a standardized method that is more compassionate and effective

*As measured by* 1) global rating scales completed by faculty mentors at the end of the rotation, 2) multisource appraisals completed by SW and nursing

**(Professionalism)**
- Appreciate the patient’s ambivalence and uncertainty about making the transition from curative or life-prolonging treatment to palliative care
• Learn how to negotiate with patients and families to resolve conflict in futile patient care situations
As measured by 1) global rating scales completed by faculty mentors at the end of the rotation, 2) multisource appraisals completed by SW and nursing

(Systems-based Practice)
• Understand the role of other disciplines in end of life care and learn how to refer appropriately
• Learn about the role of specific interventions that may alleviate distress such as dream work, meditation, music therapy etc.
As measured by 1) global rating scales completed by faculty mentors at the end of the rotation

Type of Clinical Encounter
Patient encounters consist of hospital-based consultation with supervision by faculty preceptor (geriatrician, social work, RN, pastoral staff). The fellow will review the medical record, interview and examine the patient, synthesize information and then present the case to a geriatric faculty member

Teaching Methods
Mini-didactic sessions with faculty and other learners
Problem-based learning during palliative care team meetings
Case-based learning (case discussions with faculty preceptor)
Individual study using listed references and web-based materials
Multimedia learning
e-learning

Patient Characteristics/ Mix of Diseases
Patient’s typically have advanced stage illness with reduced functional status and reduced life expectancy. The VA population is 85% male. The hospice population is 55% women. Common diseases include cancer, CHF, COPD, end-stage renal disease and dementia.

Procedures
None

Bibliography (Texts/ Articles):
2. Educating Physician in End of Life Care (EPEC) resources. The American Medical Association, 1999.
3. Tuesdays with Morrie, Mitch Albom.

Websites:
I have read and reviewed the goals and objectives for this rotation.

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Fellow Signature     Faculty Signature