

Phase 2/3 Elective Description

Campus: Southeast (Fargo)

Department: Internal Medicine

Elective/Experience Title: Hospice and Palliative Medicine

Course Number: IMED 9210

Location of Elective: Hospice of the Red River Valley (HRRV) and Essentia Health

Preceptor(s): Tracie Mallberg, MD and Mark Rostad, MD

Period(s) Offered: All

Course prerequisites:

Number of students per period: 1-3

Revised Curriculum Phase(s): 2 & 3

Purpose: To educate students on the management of progressive chronic illness focusing on quality of life using the Hospice and Palliative care model.

Hospice and palliative medicine represent the medical components of the broad therapeutic model known as palliative care. This is specialized medical care for people living with an incurable progressive chronic illness. Palliative care is initiated at any phase of the illness, including the curative phase, continuing through the course of the illness and culminating in the hospice trajectory. This model of care focuses on decreasing the burden of the progressive chronic illness by focusing on quality of life and by managing factors that contribute to the suffering of the patient and the patient's family. Hospice and palliative medicine also facilitate the discussion with patients and families concerning end of life diagnosis, prognosis, and plan of care. The model of care is interdisciplinary and addresses the physical, psychological, social, and spiritual needs of the patients and their families.

Objectives: Following successful completion of this elective, the student will be able to:

1. State the philosophy and goals for the care of hospice/palliative care patients and their families. *(Competency 5.6)*
2. Demonstrate knowledge of palliative/hospice eligibility and appropriateness for the hospice benefit based on terminal diagnosis. *(Competency 3.4, 5.6)*
3. Demonstrate the ability to identify settings in which hospice services can be administered. *(Competency 3.4, 5.6, 6.1)*
4. Summarize the interdisciplinary care process and state the roles of individual members of the interdisciplinary group. *(Competency 4.2, 7.2, 7.3, 7.4, 7.5)*
5. Choose to establish rapport with hospice patients and their families, including having difficult conversations to explore goals of care and using patient-centered communication to enhance the physician-patient relationship. *(Competency 4.1, 4.8, 5.9)*
6. Utilize individual patient and family goals to generate a plan of care which honors the patient's philosophy and values. *(Competency 3.4, 3.9, 4.6)*
7. Generate pain management plans, using clinical assessment tools, indicators of pain, pharmacologic and non-pharmacologic modalities of treatment and strategies to manage pain effectively. *(Competency 2.4, 2.7, 3.4)*
8. Demonstrate the ability to identify psycho-social, cultural and spiritual concerns affecting pain. *(Competency 2.8, 2.9, 4.1, 5.5)*

9. State the clinical pharmacology of pain medications including: alternate routes, equianalgesic conversions, appropriate titration, toxicities, and management of common side effects for opioids, and the use of adjuvant drugs (e.g. anticonvulsants, antidepressants, steroids) for pain management. *(Competency 2.7)*
10. Summarize core knowledge in management of other common symptoms in advanced disease: anxiety, dyspnea, constipation, secretions, delirium, anorexia and nausea. *(Competency 2.6)*
11. Demonstrate the ability to identify trajectory of disease in determining prognosis for patients with progressive chronic disease. *(Competency 3.3, 4.6)*
12. Summarize/explain the importance of conveying prognostic information to patients. *(Competency 4.1, 4.6)*
13. Summarize ethical issues confronting patients with terminal illness and their families including end of life decision-making, advance directives, conflict resolution, withdrawal of life-sustaining therapies, palliative sedation and assisted suicide. *(Competency 4.6, 5.6, 5.9)*
14. Demonstrate the ability to identify common symptoms, signs, complications and variations in the normal dying process and summarize their management. *(Competency 3.3, 3.4)*
15. Demonstrate the ability to perform and interpret various assessment/screening tools utilized in the hospice setting, such as PPS, FAST, MMSE, and NYHA. *(Competency 2.5, 3.2, 3.3)*
16. Summarize the specific challenges of pediatric hospice/palliative care including understanding the concept of concurrent care. *(Competency 2.8, 5.6)*
17. Identify the influence of cultural beliefs on end of life care. *(Competency 3.9, 5.6)*

Instructional Activities: During this elective, the student will be involved in/experience:

1. Review of the HRRV orientation manual
2. Review of hospice Quickflips
3. Education on and use of tools used for patient assessment such as PPS and FAST
4. Use of the UNIPAC self-study series
5. Review of other geriatric, palliative care, hospice resources as assigned by preceptor
6. Case review at weekly interdisciplinary team meeting
7. Formal and Informal didactic teaching- formal teaching at hospice orientation, informal at team meeting, while seeing patients across healthcare settings,
8. Completion of a 2-page reflection paper
9. Care for a variety of patients under hospice or palliative care. These may include patients requiring pain management, non-pain symptom management, goals of care discussions, end of life care, patients with various communication challenges, and patients with varying cultural beliefs, spiritual beliefs and/or psycho-social challenges. Students will log all patient encounters and note key points of each case.
10. Attend ethics committee meetings
11. Facilitate journal club discussion and/or present to the interdisciplinary team on topics assigned by the preceptor.

Criteria for Grading: During and following this elective, the preceptor will:

1. Utilize the standardized UNDSMHS senior elective evaluation form.
2. By direct observation, evaluate the student's ability to describe hospice/palliative care including the philosophy and goals of this care, criteria and settings for hospice care, eligibility for hospice benefit and specific challenges of pediatric hospice. *(Objectives 1, 2, 3, 16)*
3. By direct observation and feedback from other team members, evaluate the student's knowledge of the role of the interdisciplinary team in hospice care and the student's ability to successfully participate in this healthcare model. *(Objective 4)*
4. By direct observation and through feedback from patients and their families evaluate the student's ability to clearly communicate in a patient-centered manner the patient's plan of care, including showing appreciation for patients' cultural and spiritual beliefs. *(Objectives 5, 6, 11, 12, 17)*
5. Through discussion with the student evaluate the student's knowledge of pain control including pharmacologic and non-pharmacologic methods, and the impact of a patient's cultural beliefs on pain control. *(Objectives 7, 8, 9)*
6. Through observation of the student's development of patient care plans assess their knowledge of end of life care and symptoms which may need to be treated. *(Objective 10, 14)*
7. By direct observation and through participation in ethics conferences, evaluate the student's recognition of ethical issues facing end of life care providers. *(Objective 13)*
8. By direct observation evaluate the student's ability to use tools commonly encountered in hospice care (as PPS, FAST, MMSE, and NYHA). *(Objective 15)*