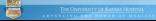


It's the "Caring, Compassionate, Holistic,
Patient and Family Centered, Better
Communication, Keeping my patient
comfortable amidst the tubes, lines,
machines" Nursing Practice

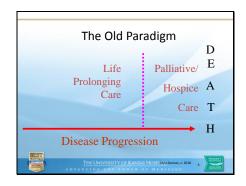
Maria Fox DNP, APRN-CNS, ACHPN, CCRN
University of Kansas Hospital, Clinical Nurse Specialist
Center for Practical Bioethics, KCMO, Clinical Ethics Associate

#### Objectives Describe the role of palliative care in patients who are critically ill: CONTEXTUALIZE Discuss the unique role of critical care nurses in patient/family communication: INDIVIDUALIZE Describe EBP strategies that integrate palliative care into critical care: STRATEGIZE

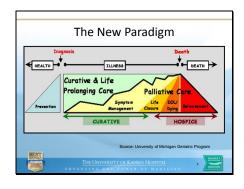






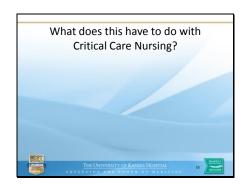


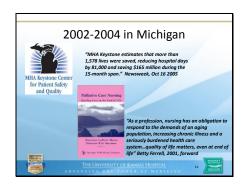




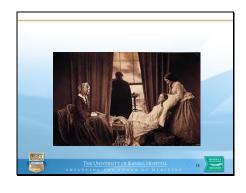
#### The New Paradigm • Establish relationship with patient/family early • Assist to improve QOL while patient is going through active treatment • "The feel better so you can enjoy life" team • Embedded in heart failure clinic, OP cancer clinics, liver clinic at KU Hospital









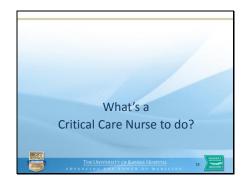
#### What does this have to do with Critical Care Nursing?

- 1 out of 5 Americans will die "in and around an ICU stay" (Angloc, et al. 2004, CCM)
- Over 55% of Americans will die in a facility (Hospital, LTACH, NH) (Kaudmann, 2005)
- Aggressive medical and surgical interventions are offered to a growing population of older adults with multiple comorbid conditions



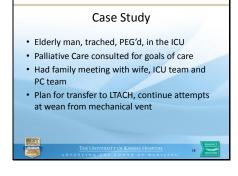
THE UNIVERSITY OF KANSAS HOSPITAL

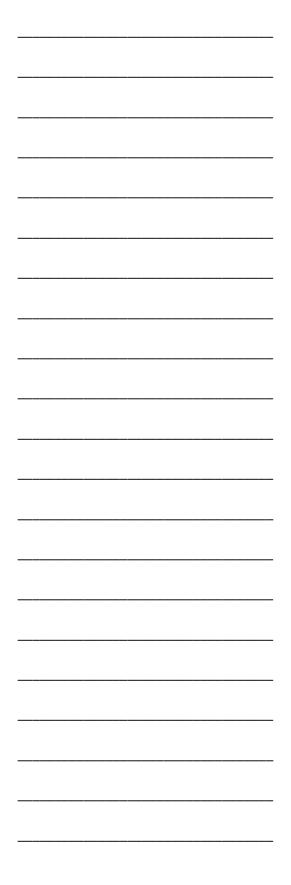


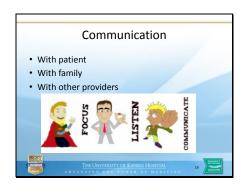








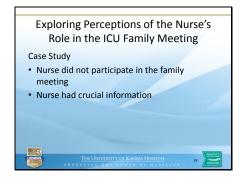


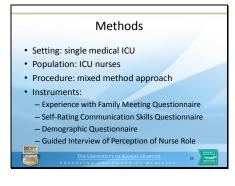


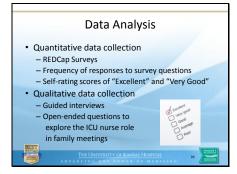


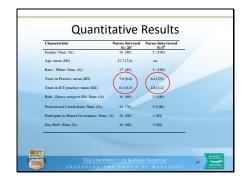



### EBP Nurse Communication in ICU • APRNs in OP settings: reduce LOS, reduce readmissions (Project ENABLE) • APRNs In Critical Care (ICS) (DAM, CL. ADDITION CONTROL OF LOWER L











# Quantitative Results Self-rating skills in family communication: "Excellent" or "Very Good" Most nurses confident about: Communicating patient needs to ICU physician Ensuring that family has opportunity to meet IDT Responding to questions about condition, treatment and goals of care Most nurses not confident about: Addressing the emotional needs of the family Responding to questions about prognosis







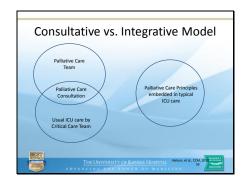


### Unique role of critical care nurse Case Study: • Elderly man, chronic vent, trached, PEG'd, planning to discharge to LTACH? • Nurse facilitated repeat family meeting at bedside and advocated for patient to tell wife his wishes • Patient went home that evening, with hospice, died the next morning at home

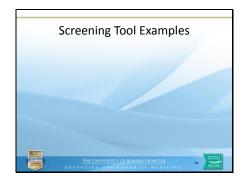


# Barriers to Better Integration • Unrealistic expectations of therapies • Misperceptions that palliative care and critical care are mutually exclusive • Palliative care equals hospice care • Palliative care means "no care" • Will hasten death

#### Barriers to Better Integration Insufficient training in communication and other skills Competing demands without adequate compensation Failure of effective approaches for system or culture change



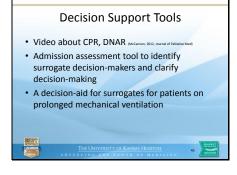


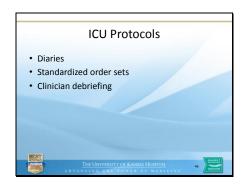



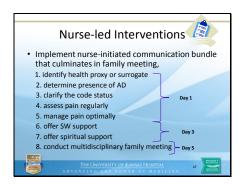




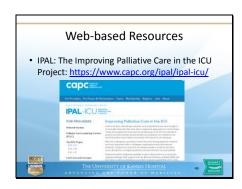




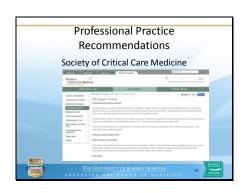


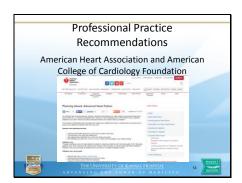










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