

COMMUNICATION SKILLS

| What They Say | What You Say |
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| How bad is this? | From the information I have now, your loved one's situation is serious enough that your loved one should be in the hospital. We will know more over the next day , and we will update you. |
| Is my mother going to make it? | I imagine you are scared. Here's what I can say: because she is 70, and is already dealing with other medical problems it is quite possible that she will not make it out of the hospital. Honestly, it is too soon to say for certain. |
| Shouldn't she be in an intensive care unit? | You/your loved one's situation does not meet criteria for the ICU right now. We are supporting her with treatments (oxygen) to relieve her shortness of breath and we are closely monitoring her condition. We will provide all the available treatment we have that will help her and we'll keep in touch with you by phone. |
| What happens if she gets sicker? | If she gets sicker, we will continue to do our best to support her with oxygen and medicines for her breathing. If she gets worse despite those best treatments, she will be evaluating for her likelihood of benefiting from treatment with a ventilator. I can see that you really care about her. |
| How can you just take her off a ventilator when her life depends on it? | Unfortunately her condition has gotten worse, even though we are doing everything. She is dying now and the ventilator is not helping her to improve as we had hoped. This means that we need to take her off the ventilator to make sure she has a peaceful death and does not suffer. I wish things were different. |
| Resuscitation Status COVID-19 | Example Language |
| Approach to when your clinical judgment is that a patient would not benefit from resuscitation | Given your overall condition, I worry that if your heart or lungs stopped working, a breathing machine or CPR won't be able to help you live longer or improve your quality of life. My recommendation is that if we get to that point, we use medications to focus on your comfort and allow you to die peacefully. This means we would not have you go to the ICU, be on a breathing machine, or use CPR. I imagine this may be hard to hear. |
| If in agreement: | These are really hard conversations. I think this plan makes the most sense for you. |
| If not in agreement: | These are really hard conversations. We may need to talk about this again. |



When/How to Call for Help

PALL pager – University, PAL3 pager - Memorial

We are here to help. We've got your back.

In addition to typical circumstances and consults, please consult us if:
 Patient in respiratory distress and not getting comfortable with initial efforts



Additional Resources

See **"Clinical Resources" tab in Epic: Palliative Care**

Download these apps (Google Play or App Store) for more palliative care resources:



VitalTalk Tips (Communication)



Fast Facts (Symptom Management)

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