Palliative Care: What do you know?

*Group Pre-Quiz*

1. Which of the following is the *best* definition of palliative care?
   a. Relief of symptoms, pain, and stress from a terminal illness
   b. Relief of symptoms, pain, and stress from any serious illness
   c. Relief of symptoms, pain, and stress for patients who have chosen not to pursue further medical treatment for their disease
   d. Comfort care at the end of life

2. Which of these diagnoses/situations would *most certainly* qualify a patient for hospice care?
   a. A patient with a qualifying diagnosis (pancreatic cancer, not undergoing treatment) with life expectancy of \( \leq 12 \) months
   b. A patient with a qualifying diagnosis (ALS), living alone
   c. A patient with a qualifying diagnosis (HIV, CD4 = 462) receiving dialysis for renal failure
   d. A patient with a qualifying diagnosis (renal failure secondary to severe end-stage liver disease), with an INR > 1.5 and serum albumin concentration < 2.5 gm/dL

3. Even if a patient has an appropriate diagnosis to qualify for hospice, which of these factors would negate eligibility for hospice care?
   a. Inability to pay
   b. Symptoms that cannot be managed by a caregiver at home
   c. Receiving treatment for a condition unrelated to the terminal diagnosis
   d. Receiving potentially curative treatment for the terminal diagnosis
   e. Patient is a full-code

4. Based on studies in 2001, where do most people die?
   a. Hospital inpatient/outpatient/ ED
   b. Nursing home
   c. Patient’s Home
   d. Dead on arrival, hospice, other, unknown location

5. Which of these statements is true regarding patient and family satisfaction with respect to care at the end of life?
   a. In patients who died in a hospital or a nursing home, bereaved family members reported excellent symptom management, satisfactory physician communication about medical decision making, strong emotional support for themselves and the patient.
   b. Bereaved family members of patients with home hospice services (in contrast to the other settings of care) reported higher stress due to the need to provide care, in addition to concerns with care and significant unmet needs.
   c. For most patients (68.9%), the last place of care was an institutional setting, either a hospital or nursing home.
   d. Most Patients who die in hospitals or nursing homes have their pain adequately managed throughout the dying process.

6. T/F Care does not end with the death of the patient, but continues through death pronouncement, family notification of the death, discussion of autopsies, and immediate bereavement support.

7. T/F Management of pain, dyspnea, N/V, or other end-of-life symptoms should be managed aggressively except at the expense of the patient’s consciousness.

8. T/F In terminally ill patients, morphine is the mainstay of treatment for dyspnea, a very common EOL symptom. Opioid titration requires repeated assessments to achieve maximal benefits and to avoid side effects.

9. T/F When a hospice patient dies at home, the family should call 911 to report his or her death.

10. T/F Physician prognostication in advanced illness is largely inaccurate and their communication about it is also imperfect.