



NEW PALLIATIVE MEDICINE CONSULT

PALLIATIVE MEDICINE

DATE: _____

NAME/DOB: _____

ROOM: _____

- | |
|--|
| <input type="checkbox"/> DNR Order
<input type="checkbox"/> Durable DNR on File
<input type="checkbox"/> Advance Directive
<input type="checkbox"/> ICU/Intubated |
|--|

Is this Primary Palliative Care?

- Basic pain management
- Initial resuscitation discussion
- Routine advance care planning (advance directive, healthcare power of attorney)
- Basic questions about hospice benefit/services
- Entering and managing comfort care orders for patients who are comfort care only
- Following through with details of post-discharge disposition once goals are clear

- ACTION: CALL ORDERING PROVIDER; PROVIDE SUGGESTIONS; CANCEL CONSULT

Is this consultation out of scope of Palliative Medicine?

- Chronic nonmalignant pain with no serious/life-limiting illness
- Assessment and management of a substance-abuse disorder

- ACTION: CALL ORDERING PROVIDER; CANCEL CONSULT

Is this a specialty Palliative Medicine Consultation?

- Advanced pain management in patients with advanced illness
- Communication about prognosis in advanced illness including care options
- Complex resuscitation discussions
- ER consultations that by addressing care goals may impact location of admission
- Family meeting in ICU patients with limited prognosis or advanced illness
- Psychosocial and spiritual support for patients and families with distress from advanced illness

Is this consultation:

- Emergent* – PM Team notified to see within 1 hour*
*Patient experiencing intolerable escalating symptoms due to advanced illness
- Urgent* – PM Team notified to see same day
*Emergent or Urgent is NOT based on time of discharge
- Routine – PM Team introduces services and schedules meeting time within 48 hours
- Census over 24 and urgent or routine - Notify primary team to cancel consult and re-submit if needed in 48 hours*
*Emergent consults will still be seen regardless of census

ACTION/Notes:

Referred to: