



Generalist Palliative Care Primary Assessment...

- Do we know patient's Advance Directives?
- If a legal Advance Directive exists, is there a copy in the chart?
- Can the patient direct their own care?
- Do we know the patient's surrogate decision maker?
- Has the medical message been clearly communicated?
- Do we know the Goals of Care?
- Have the Goals of Care been discussed with patient-surrogate?
- Does the code status align to support Goals of Care?
- Has the patient's code status been discussed with patient-surrogate?
- Are symptoms under adequate control?
- Does patient-family feel communication is adequate?
- Are the patient-family's emotional and spiritual needs addressed?





Generalist Palliative Care

- Basic management of pain and symptoms
- Basic discussions about
 - Prognosis
 - Goals of treatments
 - Code status

Specialist Palliative Care

- Refractory pain and other symptoms
- More complex anxiety, grief and existential distress
- Assistance with conflict resolution
 - Within families
 - Between staff and families
 - Among treatment teams

Generalist and Specialist palliative care can occur at any stage of serious illness.

Early at time of diagnosis, in the mid-stage of living with serious illness, or late-stage interventions.



T. Quill, A. Abernethy. *N Engl J Med* 368:13, 2013.

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