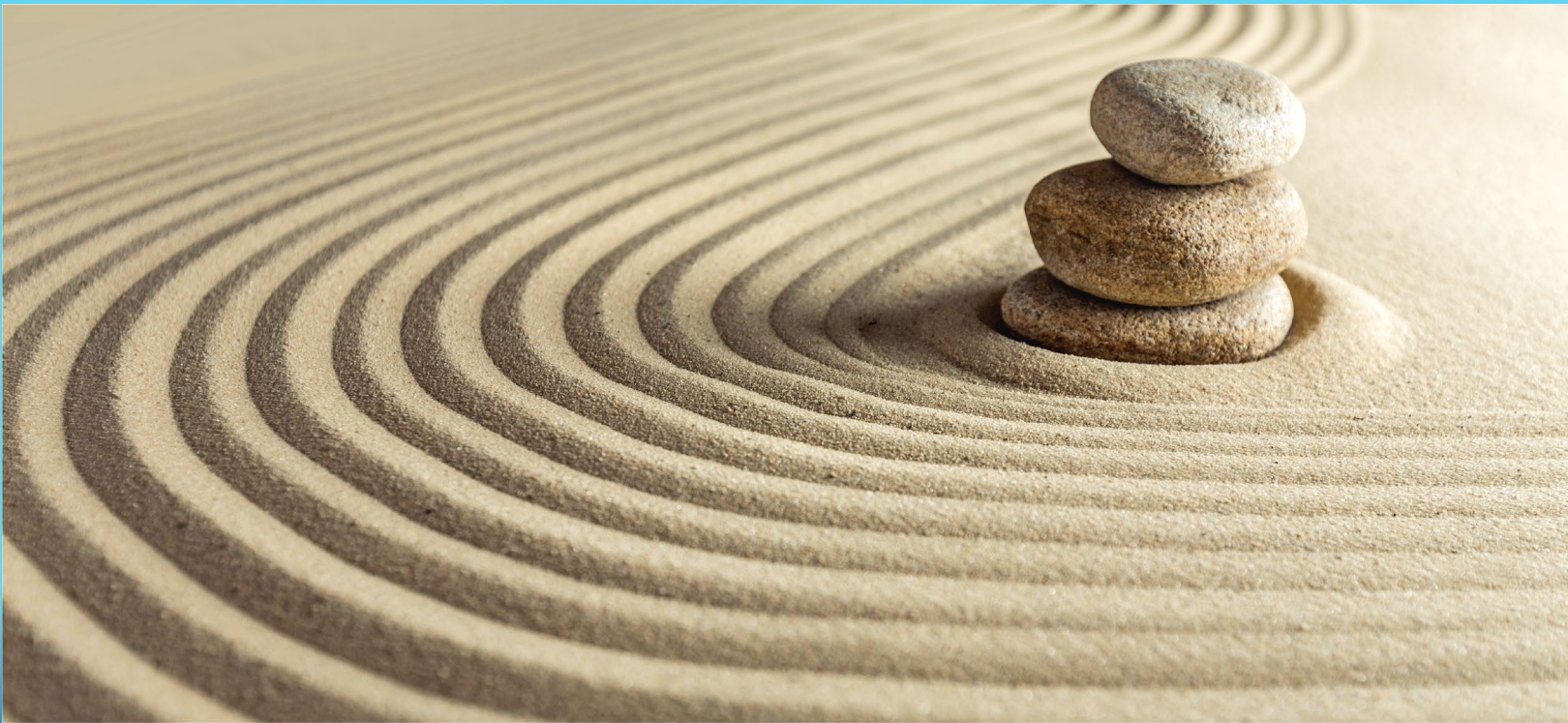


TRANSITIONING TO COMFORT CARE



OBJECTIVES

1. Overview
 2. Settings
 3. Initiation of comfort care
- 
- A decorative graphic consisting of several parallel white lines of varying lengths, slanted upwards from left to right, located in the bottom right corner of the slide.

“ MY DAD IN ROOM 8 HAS DECIDED TO FOCUS ON COMFORT CARE. WHAT DOES THAT LOOK LIKE? ”



OVERVIEW

- Comfort care can be initiated without a plan for hospice care but some patients who come to the ED needing comfort care may be on hospice care prior to arrival
- Hospice – separate module. In brief, < 6 month life expectancy with a focus on comfort rather than life-prolonging measures
- Hospice is a **service** that can be provided in various settings. For example:
 - Hospice at home
 - Hospice house – general inpatient hospice facility
 - Hospice in place (e.g. inpatient or in the Emergency Department)

HOW DO I TRANSITION A PATIENT TO COMFORT CARE?

- Varies by institution
- If comfort care is being considered in the Emergency Department, it is initiated by the ED treatment team after confirming care goals and changing code status
- Hospice referral or other services which maybe needed are typically coordinated by a **social worker** or **case manager**



COMFORT CARE ORDERS

- Discontinue any unnecessary life-prolonging medications that do not address symptoms or comfort
- Consider continuing medications for chronic conditions such as **CHF** or **COPD** to address symptoms and comfort
- Make sure they are on a bowel regimen!
- Atrium Health System
 - Use Withdrawal of Life Support / Comfort Care Order Set



Commonly Used Parenteral Medications for Symptom Management (IV or SQ unless specified/avoid IM)

Medication/Category	Indications	Dose Example (mild → severe)
Opiates	Pain/Dyspnea	
Morphine		2mg/4mg/6mg
Fentanyl		25mcg/50mcg/100mcg
Hydromorphone		0.5mg/1mg/2mg
Benzodiazepines	Anxiety/Seizures/Dyspnea	
Lorazepam		0.5mg/1mg/2mg
Midazolam		2mg/4mg/8mg
Diazepam		2mg/5mg/10mg
Antiemetics	Nausea	
Ondansetron		4mg
Compazine		5-10mg
Antipsychotics	Agitation/Nausea	
Haloperidol		2mg/5mg/10mg
Droperidol		2mg/5mg/10mg
Anticholinergics	Excessive Airway Secretions	
Glycopyrrolate		0.4mg
Atropine (1% eye drops)		2 drops sublingual

Note: For opiate-naïve patients use lower dosing first

SUMMARY

- Hospice can be provided anywhere and the CM can help arrange it no matter where they go. For a hospice referral in the Emergency Department, it is usually coordinated by a **social worker** or **case manager**
- Comfort care may be initiated without hospice enrollment/referral
- Discontinue any unnecessary medications that do not address symptoms or comfort. Consider continuing CHF, COPD meds
- Atrium Health: utilize the **Comfort Care Order Set** in Epic

*Palli***EM***.org*

The logo consists of the word "PalliEM.org" in a blue, cursive script. The letters "EM" are rendered in a bold, red, sans-serif font. A green ECG (heart rate) line is superimposed over the "EM" letters, starting from the left and ending at the right.