

# Palliative Care Screening Tool in the Emergency Department

Kalie Dove-Maguire, MD; Naomi George, MD

Grudzen C, et al. *Acad EM*, 2010 PMID [21175525](#); Wu FM, et al. *J Palliat Med*, 2014 [23971709](#)  
George N, et al. *Acad EM*, 2015 PMID [26171710](#)

## What is Palliative Care?

Palliative Care focuses on improving the care and quality of life for patients with advanced illness by decreasing suffering. It can be delivered concurrently with curative care. Early identification of patients who are likely to benefit is key.

## Determine if YOUR patient could benefit from Palliative Care consultation.

### STEP 1: Determine if your patient has at least 1 life-limiting illness:

Life Limiting Illness	Description
Advanced Dementia or CNS Disease (e.g. CVA, ALS, Parkinson's)	Assistance needed for most self-care (e.g. ambulation, toileting) and/or minimally verbal
Advanced Cancer	Metastatic or locally aggressive disease
End Stage Renal Disease	On dialysis or serum creatinine >6 mg/dL
Advanced COPD	Continuous home O2 or chronic dyspnea at rest
Advanced Heart Failure	Chronic dyspnea, chest pain, or fatigue with minimal activity or rest
End Stage Liver Disease	History of recurrent ascites, GI bleeding, or hepatic encephalopathy
Septic Shock	Requires ICU admission AND has significant pre-existing comorbid illness
High Chance of Accelerated Death	Provider discretion – e.g.: Hip fracture in age >80, major trauma in elderly (multiple rib fractures, intracranial hemorrhage), advanced AIDS

### STEP 2 (Consultation): Consider a Palliative Care consultation if your patient has at least 1 life-limiting illness (above) AND 1 or more of the following:

Palliative Care Need	Description
Frequent visits	2 or more ED visits or hospitalizations in the past 6 months
Uncontrolled symptoms	Visit prompted by uncontrolled symptom (e.g. pain, dyspnea, depression, fatigue)
Functional decline	Examples: Loss of mobility, frequent falls, decreased oral intake, skin breakdown
Uncertainty/distress	Caregiver cannot meet long-term needs; Uncertainty or distress about goals-of-care
"Surprise" question	You wouldn't be surprised if the patient died within 12 months

### Symptom Control: Improve quality of life in the ED

Symptom	Interventions to Consider
Agitation	Haloperidol
Anxiety	Lorazepam or diazepam
Dyspnea	Supplemental O2 and/or morphine for comfort
Pain	Standing morphine or fentanyl, or use of opioid drips

Updated 7/17/15