

Increasing Inpatient Palliative Care Consultations for End-Stage Heart Failure Patients

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Abstract Title: Increasing Inpatient Palliative Care Consultations for End-Stage Heart Failure Patients

Significance and Background: Despite the high symptom burden and decreased quality of life associated with end-stage heart failure (ESHF), the use of palliative care remains underutilized. A palliative care standardized referral process for those with ESHF reduces ordering variability and may ultimately improve quality of care delivered.

Purpose: The purpose of this project is to develop and implement a standardized palliative care referral process for ESHF patients on a progressive care unit (PCU) within an academic medical center.

Methods: The Transitions Model of Palliative Care was used to guide this project. PCU providers received weekly email triggers outlining evidence-based palliative care referral criteria for ESHF patients. Surveys were distributed to PCU providers and nurses to assess perceptions of the intervention. Patient demographics and consultation characteristics were analyzed. Post-intervention survey data was compared using an independent *t-test*.

Results: Eleven palliative care consultations were placed for ESHF patients in the PCU over the eight-week implementation period. Compared to the pre-intervention data, this demonstrates increased utilization of palliative care services with the implementation of a standardized referral process. Survey results indicated that PCU providers and nurses have an improved understanding of palliative care and found the intervention to be favorable.

Discussion: Although cardiology providers express understanding that heart failure is life-limiting with a high symptom burden, palliative care is underutilized for this patient population. The use of a trigger system may serve as an effective tool in increasing palliative care services for inpatient ESHF patients.

Learning Objectives:

1. Upon completion, participants will be able to understand the need for palliative care services for the end-stage heart failure patient.
2. Upon completion, participants will be able to understand the importance of electronic triggers for palliative care for the end-stage heart failure patient population.
3. Upon completion, participants will be able to apply an electronic trigger for end-stage heart failure patients into practice.