

ASSESSING SYMPTOMS IN ICU PATIENTS

- Perform a symptom assessment at least once per shift
- Assessment method guided by sedation level and mental status:

Patient Status	Appropriate Assessment Methods
RASS = -1, 0, or +1	<ul style="list-style-type: none"> • Verbal descriptor scale (None/Mild/Moderate/Severe) • Numeric rating scale: 0-10 (0=none, 10=worst)
Patient unable to rate e.g. RASS <-1 or >+1, +CAM-ICU	<ul style="list-style-type: none"> • “Yes/No” • Observation tool, e.g. Critical Care Pain Observation Tool • Treat symptom presumptively, e.g. pain during procedures

EVALUATION & TREATMENT OF COMMON SYMPTOMS IN ICU PATIENTS^a

Symptom	Treatments / Work-Up
Pain	Non-opioid and opioid analgesics Nonpharmacological, e.g. Guided relaxation, massage, music
Tired	Assess and address sleep hygiene
Thirsty	Frequent mouth care Consider thirst bundle ^b
Anxious	Nonpharmacological, e.g. Guided relaxation, music, massage, aromatherapy Consider medication, e.g. Benzodiazepines
Restless	Assess & treat delirium, discomfort Nonpharmacological: e.g. Physical therapy, massage
Hungry	Assess and adjust feeding method
Short of Breath	Consider change in breathing support Nonpharmacological, e.g. Guided relaxation, music Consider medication, e.g. Opioids, benzodiazepines
Sad	Assess & treat depression Nonpharmacological, e.g. Frequent reassurance, music
Scared	Assess & treat delirium Nonpharmacological, e.g. Frequent reassurance, massage
Confused	Assess & treat delirium Nonpharmacological, e.g. Frequent orientation, family visits
Nauseated	Nonpharmacological, e.g. Aromatherapy, limit smells Antiemetic medications
Constipated	Bowel regimen

^a Puntillo et al *Critical Care Med.* 2010;38:1-6

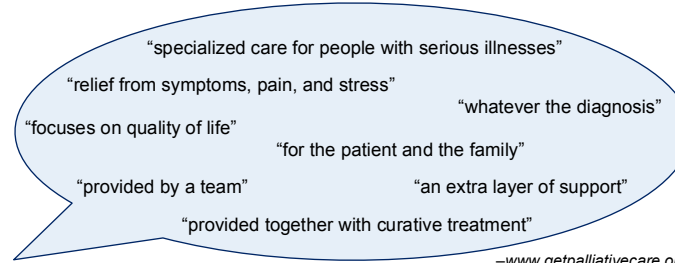
^b Puntillo et al *Intensive Care Med.* 2014;40:1295-302



IMPACT-ICU

INTEGRATING MULTIDISCIPLINARY PALLIATIVE CARE INTO THE ICU

WHAT IS PALLIATIVE CARE?



DAILY ICU PRIMARY PALLIATIVE CARE NURSING ASSESSMENT

1. **Patient Symptoms:** Does the patient have any uncontrolled symptoms?
2. **Family Distress:** Is the patient's family emotionally distressed or struggling to cope?
3. **Communication:** Do you have concerns about the quality of family-clinician communication about prognosis and goals of care?

RESOURCES FOR ADDRESSING PALLIATIVE CARE NEEDS

ICU and/or Primary Physician Team

- Managing physical symptoms
- Clarifying prognosis and goals of care

Social Work

- Support for stress and adapting to illness
- Financial, insurance, legal issues
- Counseling children and families

Spiritual Care Services

- Counseling & comfort about meaning of illness
- Guided relaxation for symptom management
- Prayer, religious rituals, and resources

Palliative Care Nurse and/or Consult Service

- Managing physical symptoms
- Emotional support of patients and families
- Counseling about prognosis and goals of care

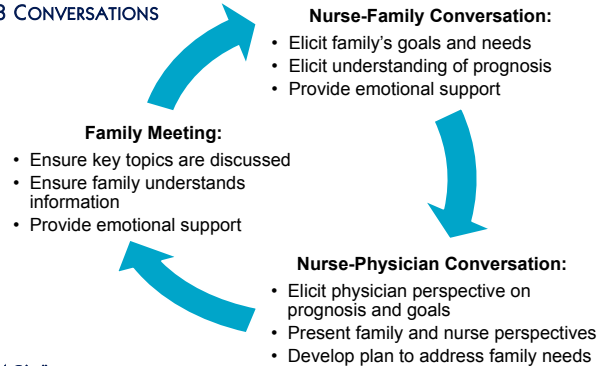
ICU COMMUNICATION QUALITY BUNDLE

by ICU Day 1	<ul style="list-style-type: none"> Identify & document surrogate decision-maker Determine & document advance directive status Establish & document resuscitation status
by ICU Day 2	Offer social work & spiritual support to family
by ICU Day 5	Multidisciplinary family meeting

Nelson et al. Qual Saf Health Care. 2006;15:264-271

KEY ROLES FOR BEDSIDE NURSES IN COMMUNICATION ABOUT PROGNOSIS, GOALS OF CARE, AND PALLIATIVE CARE

THE 3 CONVERSATIONS



"THE 4C'S"

Convening	Making sure multidisciplinary family-clinician communication occurs
Checking	<ul style="list-style-type: none"> Identifying family needs for information Ensuring that families clearly receive desired information Ensuring that clinicians understand family perspectives
Caring	Naming emotions and responding to feelings
Continuing	Following up after discussions to clarify and reinforce information and provide support

Krimshtein et al. J Palliat Med. 2011;14:1325-1332

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CORE COMMUNICATION SKILLS: TOOLS FOR NAVIGATING DISCUSSIONS WITH FAMILIES & OTHER CLINICIANS

Skill	Function	Example
Open-ended questions	Elicit another person's perspective	"What do you understand about your husband's illness?"
Reflection statements	Show you want to understand another person's perspective	"It sounds like this has been a really stressful week for you."
NURSE	Demonstrate empathy in response to expressions of emotion	Name: "You sound frustrated." Understand: "This must be so difficult." Respect: "I respect how you haven't left your daughter's side." Support: "I am here to help you through this." Explore: "What is the hardest part?"
Tell me more	Learn more about another's perspective	"Tell me more about what your mom liked to do before she got sick."
Ask-Tell-Ask	<ul style="list-style-type: none"> Start with family/physician understanding Get permission to give information Present information clearly Check understanding or agreement 	Family: "How is my daughter doing?" Nurse: "That's an important question. I'd (Ask) be happy to discuss it. First, may I hear your sense of things?" Family: "She seems to be resting today – is that good?" Nurse: "I see that too. But I'm worried (Tell) she is sleepy because her kidneys are getting worse." Nurse: "I think we should discuss your (Ask) daughter's status with her doctors. Would it be ok if I arranged a time?" Family: "That would be good."
Hope / worry statements	Honestly present information while aligning with family/physician	"We're hoping that she gets stronger too. We're also worried that her lungs are showing signs of worsening."