

PALLIATIVE MEDICINE

THE ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA

Objectives of Training and Specialty Training Requirements in Anesthesia

Specific Objectives in CanMEDS Format

OVERALL GOALS

Anesthesia residents may take the opportunity to perform a rotation(s) in palliative medicine during their residency which will allow for a broad exposure to the care of terminally ill patients along with their numerous and often times challenging problems. Due to the nature of the work in palliative care, the resident will find that many of the skills required to perform effectively during this rotation are very well representative of the goals and objectives associated with the CanMEDs roles as established by the Royal College of Physicians and Surgeons of Canada.

Medical Expert

The resident will be able to:

- Demonstrate diagnostic and therapeutic skills for ethical and effective patient care
- Access and apply relevant information to clinical practice
- Demonstrate effective consultation services with respect to patient care, education and legal opinions
- Understand ethics, law and policy governing palliative care delivery in Canada

Symptom Management - Education will be based on clinical situations that present during the rotation

Pain - the resident must demonstrate knowledge re:

- How to assess and treat different types of pain and pain syndromes associated with cancer
- Current theory on how cancerous growth excites a pain response
- The pharmacology of NSAIDs, opioids and adjuvant drugs uses in the treatment of pain
- Tolerance, physical dependence, addiction and routes of administration of opioids, especially morphine, hydromorphone and methadone
- Non-pharmacological approaches to pain management including anesthetic and surgical options
- Various interventional pain treatment options which includes indications, contraindications and complications
- Dyspnea, delirium, nausea, vomiting, constipation, bowel obstruction, decubitus ulcers, anxiety, depression, etc. vis-à-vis current thoughts about pathophysiology and treatment of these different symptoms
- Common syndromes associated with cancer
- The management of emergencies such as hypercalcemia, severe dyspnea, severe pain, spinal cord compression, SVC syndrome, pathological fractures, seizures and hemorrhage in the palliative setting

Communicator

The resident will be able to:

- Establish therapeutic relationships with patients/families
- Obtain and synthesize relevant history from patients/families/communities
- Listen effectively
- Discuss appropriate information with patients/families and the health care team

Psychosocial Issues:

- Communication
 - different techniques and approaches for communicating distressing information to patients/families
 - working in an interdisciplinary team with participation in rounds, team and family conferences, and death reviews
 - working with patients and families to determine appropriate goals of treatment for stage of disease
- Patient and Family Care
 - issues related to outpatient management and management of symptoms in a home setting
 - cultural/spiritual issues and alternative/unorthodox therapies as they relate to the palliative care situation
 - issues related to bereavement of families and caregivers, including management of grief

Collaborator

The resident will be able to:

- Consult effectively with other physicians and health care professionals
- Contribute effectively to other interdisciplinary team activities
- Demonstrate timely and appropriate consultation skills directed towards various medical specialties including oncology, interventional radiology and orthopedics
- Participate meaningfully in numerous multidisciplinary rounds and recognize the importance of contributions from various paramedical, psychosocial and spiritual experts



Leader

The resident will be able to:

- Utilize resources effectively to balance patient care, learning needs and outside activities
- Allocate finite health care resources wisely
- Work effectively in a health care organization
- Utilize information technology to optimize patient care, life-long learning and other activities
- Collaborate effectively with various care coordinators in order to ensure that resources are used as efficiently as possible

Health Advocate

The resident will be able to:

- Identify the important determinants of health affecting patients
- Contribute effectively to improved health of patients and communities
- Recognize and respond to those issues where advocacy is appropriate
- Understand, through observation, the important role of health advocacy for patients that the physician plays at various levels of hospital administration

Scholar

The resident will be able to:

- Develop, implement, and monitor a personal continuing education strategy
- Critically appraise sources of medical information
- Facilitate learning of patients, house staff/students and other health care professionals
- Contribute to the development of new knowledge
- Demonstrate effective skills and techniques necessary to acquire information related to patient care from various sources, including library and internet-based searches

Residents will have the opportunity to present, in an informal setting, a topic of interest that is relevant to the delivery of palliative care

Professional

The resident will be able to:

- Deliver the highest quality of care with integrity, honesty and compassion
- Exhibit appropriate personal and interpersonal professional behaviours
- Practice medicine ethically, consistent with the obligations of a physician
- Recognize, as with all areas of medicine, that the delivery of compassionate care is paramount, however, during the terminal phase of illness, these skills are of particular import



The resident will be exposed to numerous ethical issues that will require careful attention and skill in order to manage them effectively

Anesthesiologists are often identified as pain and symptom control physicians. Their expertise may be requested to assist with dying patients within their communities with controlled symptoms, even if they do not practice Palliative Medicine.

Many patients admitted to ICU do not survive, requiring the delivery of palliative care principles in the ICU setting.

Evaluation

Resident/Fellows will be evaluated on their assessment and care of patients, and on relationships with patients, families and interdisciplinary team members. The trainee will be required to present, in an informal setting, a topic of interest that is relevant to the delivery of palliative care (at least one article for Journal Club).

Attendance at weekly Palliative Care Rounds is strongly encouraged.