

Talking about Code Status

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PERSPECTIVES



- Think of talking about code status with families as a procedure with indications, contraindications, and even complications.
- > 70% of older adults consider quality of life more important than life extension.
- > 60% of older adults think that inability to get out of bed or requiring a breathing machine is worse than dying.
- Stepwise approach:
 - Ask permission to share bad news.
 - Explain the bad news clearly.
 - Verbiage like "I am worried that your relative might not survive" can be helpful.
 - Expect a medical question but respond with something like "I cannot imagine how scared this must make you feel".
 - Ask about baseline function
 - "What kind of activities was your mother doing day to day before this started?"
 - Ask what quality of life the patient would find worth living for
 - Consider the question "would your mother be ok if she was to become ventilator dependent"
 - Summarize back to the family member.
 - O Give your recommendations.



ED Code Status Conversation Guide

Goal: Make patient-centered recommendations regarding intubation for patients who may be at high-risk for poor outcomes. After establishing that <u>advance directive does not exist</u>, complete the following steps:

Steps	What To Say
Break bad news	Permission: I am afraid I have serious news. Would it be OK if I share? Disclose: Your [mother] is having a very difficult time breathing due to a [severe pneumonia]. With her serious health issues, I am worried that things may
Alian	not go well, and it's possible [she] could even die.
Align	We need to work together quickly to make the best decisions for [her] care.
Baseline function	To decide which treatments might help [her] the most, I need to know more about [her]: What type of activities was [she] doing day to day before this illness?
Values Use question(s) as appropriate	Has [she] expressed wishes about the type of medical care [she] would or wouldn't want? How might [she] feel if treatments today led to: Inability to return to [her] favorite activities? Inability to care for [herself] as much as [she] does? What abilities are so crucial that [she] wouldn't consider life worth living if [she] lost them? How much more would [she] be willing to go through for possibility of more time? Are there states [she] would consider worse than dying?
Summarize	What I heard is that your [mother] considered most important, and that [she] would consider treatments that result in unacceptable. Did I get that right?
Recommendation	Based on what you've shared with me, we would recommend: Intensive treatment focused on comfort; or Intensive treatment focus on recovering from illness We will use all available medical treatments that we think will help [her] recover from this illness. For [her], this means: Supporting [her] body in recovering from this illness without treatments that could make [her] more uncomfortable, while do everything we can to assure that [she] is comfortable and peaceful; or Supporting [her] body in recovering from this illness with all the intensive treatments we have, including ventilators, and so on, while also doing everything we can to assure that [she] is as comfortable as possible. I worry that even with maximum care, [her] body may still tire out. The admitting teams will support you over the coming days with upcoming decisions.



References

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