Outline

An Inexact Art & Science

Illness and dying trajectories Frailty Dementia Prognostication and prognostic scales When to refer to palliative care or hospice (disease specific)

Essentials of Care: Comfort, Communication, Choices, Control

Comfort Always

Morphine: Still the gold standard? Pain during the final hours of life Drug misuse: How to avoid it Opioids for dyspnea Thirst vs. xerostomia Medical marijuana Complementary and alternative therapies Emotional distress interventions The role of spirituality Palliative sedation

Communication: Everyone is Involved

Advance care planning: More than just a form The terminology matters Your role in these critical conversations How much can we share? Truth vs. hope Code status discussions DNR does not mean do not treat Addressing concerns and needs of the family Thanatophobia: Is it fear of dying or fear of death? Premortem surae Near death awareness The dying process

Objectives

- 1. Explain how complementary therapies enhance quality of life for patients.
- 2. Evaluate the risks and benefits of medical marijuana.
- 3. Acknowledge the eight domains of the 7. Connect moral resiliency to palliative National Consensus Project.
- 4. Analyze five complications related to artificial hydration and nutrition.

- **Choices: Shared Decision-Making**
- Nutrition & hydration choices Voluntarily Stopping Eating and Drinking (VSED): Benefits & burdens Life-sustaining treatment Non-beneficial treatment choices Faith-based influences Ventilator support Dialysis or renal palliative care Devices to extend life Hastened death request: Why not humanely euthanize?

Allowing Control: Patient-Centered Care

Reframing hope What do family members want you to consider Who makes the decision What about family dysfunction... Is the focus quality or quantity? Decision to withhold or withdraw care Challenging decisions: Honoring patients' wishes

Cultivating Moral Resiliency

Moral resilience-preserving/restoring integrity Personal vs. professional grieving Enabling character and honorable action **Ethical Competency**

Live Seminar & Webcast Schedule: (Times listed in Eastern)

7:30 Registration/Morning Coffee & Tea 8:00 Program begins **11:50-1:00** Lunch (on your own) 4:00 Program ends

10 – 15 minute mid-morning and mid-afternoon breaks For locations and maps, go to www.pesihealthcare.com, find

your event, and click on the seminar title.

- 5. Explore ethical issues often seen at the end of life.
 - 6. Formulate two strategies to diminish fear of death and dying.
 - care.

Hassle-Free Cancellation Policy: If you contact us before the event date, you can exchange for a DVD or CD/ digital manual package on the subject (self-study continuing education credit may be available), a certificate to attend another seminar, or receive a tuition refund less a \$30 cancel fee. Substitutions are permitted at any time.

Seminar on DVD or CD Package:

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NEARING THE Dare to Care

- Families ask . . . what would you do if this were your loved one? Learn how to reply without bias ...
- Creative ways to discuss withdrawing or withholding treatment
- Manage patient pain and symptoms: Medical marijuana, morphine, palliative sedation or fewer medications?
- Tips to guide code status conversations with patients and families
- **Resolve family dysfunction** surrounding end of life decisions
- Requests to "humanely euthanize"/hastening death: How to respond?
- Hear powerful case studies that provide examples of expert, holistic care



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leanor is an 83-year-old widowed lady with known chronic heart failure and advanced dementia. She is now hospitalized with a significant stroke and dysphagia. She does not have a healthcare directive and had never discussed what she would want, other than staying at home until she dies. She is full code. Her family still wants resuscitation attempted. Her children admit they are concerned about what is best for their mother.



What are options for Eleanor and her family? Would she benefit from artificial hydration and nutrition? How is she going to receive medications? Can some of her medications be discontinued? Who is going to be her caregiver?

In this compelling seminar, multiple case studies like Eleanor's will provide you with examples that you can incorporate when care is more important than cure. To deliver expert, holistic care, healthcare professionals need to have a toolbox full of new interventions to promote quality care at the end of life.

Have you ever been asked, "what would you do if this was your family member?" Learn conversation options to use while staying neutral.

Did you know that a patient might enroll on hospice care and be a full code? We will discuss how this is done.

What can we do for patients seeking euthanasia who see this as the best solution? These situations are becoming more frequent. Anticipate how you will respond.

Strategies regarding comfort, communication, choices and control have unique issues and challenges for patients, families and health professionals. We have an obligation to know how to help provide emotional, spiritual, existential, and physical comfort for those who have life-limiting conditions and to support them through difficult decisions. It's time to think outside the box.

Speaker_

Nancy E. Joyner, RN, MS, APRN-CNS, ACHPN[®], is a Palliative Care Clinical Nurse Specialist with prescriptive practice. She is currently self-employed as a consultant, speaker, educator and author. Nancy has gained extensive experience in serious illness, frailty, and end of life care through her 28 years working bedside as a registered nurse and an additional 11 years as an advanced practice nurse with prescriptive practice.

Her commitment to the specialty is seen through furthering her education to become a palliative care Clinical Nurse Specialist, certification as an Advanced Certified Hospice and Palliative Care Nurse, serving on the Hospice and Palliative Nursing (HPNA)'s Professional Development Council and becoming an HPNA Nurse Educator.

Nancy has shared her passionate insights at the local, state, and national levels. She is an ELNEC (End-of-Life Nursing Education Consortium) trained presenter, has taught the national advanced NBCHPN certification review course, and has shared her insights as an online palliative care faculty member.

You are guaranteed to learn from Nancy's passion to deliver extreme compassion, expert communication skills, and extraordinary knowledge to the end of life patients entrusted to your care.

Speaker Disclosure

Financial: Nancy E. Joyner is CEO and President of Nancy Joyner Consulting, P.C. She receives a speaking honorarium from PESI, Inc.

Non-financial: Nancy E. Joyner has no relevant non-financial relationships to disclose

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End of Life - A Nurse's Guide to Compassionate Care

By Multiple Authors

This sensitively-written book offers a wealth of insight and practical advice for nurses in every specialty and setting providing end-of-life care. Nurses will learn how to address patients' spiritual concerns, ensure that physical needs are met, help patients maintain their dignity, and provide emotional support to grieving families. Nurses will also learn how to cope with their own feelings about dying and endof-life care. Coverage includes stages of dying, nursing interventions for palliative care, pain control, alternative therapies, physical and psychological signs of grieving, and more. Vignette insights from the well-known end-of-life specialist Joy Ufema offer advice on giving compassionate care.

The Needs of the Dying

By David Kessler

The Needs of the Dyi David Kessl

End of Life

In gentle, compassionate language, The Needs of the Dying helps us through the last chapter of our lives. Author David Kessler has identified key areas of concern: the need to be treated as a living human being, the need for hope, the need to express emotions, the need to participate in care, the need for honesty, the need for spirituality, and the need to be free of physical pain. Examining the physical and emotional experiences of life-challenging illnesses, Kessler provides a vocabulary for family members and for the dying that allows them to communicate with doctors, with hospital staff, and with one another, and - at a time when the right words are exceedingly difficult to find - he helps readers find a way to say good-bye.

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Target Audience:

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