

# Burgess Square



## PALLIATIVE CARE

**Definition:** Treats suffering from serious and chronic illnesses including cancer, cardiac/pulmonary diseases, kidney/liver failure, HIV/AIDS and Alzheimer's disease. Palliative care allows patients to have better control over medical care and understanding of choices for treatment options.

**Treatment:** Patients who need comfort at any stage of disease, whether terminal or chronic. Patients may still be seeking aggressive treatments.

**Focus:** Provide patients with relief from symptoms such as pain, shortness of breath, fatigue, constipation, nausea, loss of appetite, difficulty sleeping and the stress of a serious illness regardless of the diagnosis.

**Goal:** To improve quality of life for both the patient and family. Helps prevent re-hospitalization due to uncontrolled symptoms.

**Services:** The palliative care team is a group of specialists that work in partnership with the primary physician to provide:

- Time to discuss needs, concerns and goals of care
- Expert management of pain and other symptoms
- Guidance with difficult and complex medical treatment options
- Emotional support for patients and families to cope with the stress and burden of serious illness
- Services are flexible and based on the patient needs

**Payment:** Most insurance plans cover all or part of the palliative treatment. Medicare and Medicaid also typically cover palliative services. Options for palliative care can be amended or patients can transition into hospice care at any time.

**Burgess Square** offers both palliative and hospice services that focus on quality of life for our patients. Goals of both types of care are to assist with the medical management of patient to relieve pain and other symptoms of illness, as well as coordinate goals of care or end of life issues.

## HOSPICE CARE

**Definition:** Type of palliative care for patients with end stage lung, heart, kidney, liver, neurological illness, cancer or advanced dementia. Hospice does not speed up or slow down the dying process, rather the focus is on treating patient pain and other symptoms so that a person's final days may be spent with dignity and quality of life surrounded by loved ones.

**Treatment:** Patients who have life expectancy of six months or less.

**Focus:** Support terminally ill patients not seeking curative or aggressive life prolonging treatments.

**Goal:** To improve pain and symptoms of dying patients and allow them to manage their physical, emotional, and spiritual needs.

**Services:** Hospice care team of specialists work with primary physicians to provide:

- A Registered Nurse and Patient Care Technician to care for patients and provide ongoing support and education of the dying process
- Hospice related medications that treat pain and control symptoms
- Durable medical equipment and supplies needed in day to day care of the patient
- Emotional / spiritual support of social services and chaplain to patients and their families
- Bereavement counseling

**Payment:** Hospice is covered by Medicare, Medicaid, Private insurance and HMOs. Patients can be discharged or can revoke from hospice at any time. Patients need to be recertified to qualify every two to three months.

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