

Providing Palliative Care in the Ambulatory Care Setting

Jane Griffith, MSN, RN, GNP, CHPN, Jason A. Lyman, MD, MS, and Leslie J. Blackhall, MD, MTS

Palliative care that provides specialized attention to pain and symptom management is important for patients with cancer. Palliative care aims to reduce pain and other symptoms through an interdisciplinary approach involving physicians, nurses, social workers, and other members of the healthcare team. Families are included in care planning. Patients and families benefit from the availability of palliative care services early in the disease process, particularly when symptoms impact quality of life. One way to implement early palliative interventions is the establishment of an ambulatory care clinic dedicated to palliative care. This article describes the experience of an outpatient palliative care clinic at a large teaching hospital by using case studies to highlight the benefits of ambulatory palliative care and concluding with recommendations for research.

The World Health Organization (WHO, 2010) defines palliative care as “an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual” (para. 1). According to WHO (2010), the goal of palliative care is to alleviate pain and other distressing symptoms via an interdisciplinary approach that addresses the physical as well as psychosocial and spiritual aspects of care. Families also are involved in care planning. WHO emphasizes that palliative care is “applicable early in the course of illness in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications” (WHO, 2010, para. 1).

Patients and families benefit from having palliative care services available early in the disease process, particularly when symptoms affect quality of life. The Institute of Medicine and National Research Council (Foley & Gelband, 2001) recommend that patients be offered palliative care as well as aggressive, curative therapies. Ideally, palliative care should be initiated at diagnosis, with an expectant increase in frequency and intensity of interventions as disease progresses. Foley and Gelband (2001) stated, “The goal is to maintain the best possible quality of life, allowing cancer patients the freedom to choose whatever treatments they so wish throughout the course of the disease, while also meeting the needs of patients with advanced disease through adequate symptom control” (p. 9). Early palliative interventions can be implemented by establishing an ambulatory care clinic dedicated to providing this care. This article provides an overview of an outpatient palliative care clinic at a large teaching hospital.

At a Glance

- ◆ The goal of palliative care is to relieve pain and other symptoms by using an interdisciplinary approach that addresses the physical, psychosocial, and spiritual aspects of patient care.
- ◆ Patients can receive timely, appropriate interventions for distressing symptoms in the ambulatory setting, thus improving quality of life.
- ◆ Frequent follow-up by telephone can ensure that recommended interventions are effective and help minimize burdensome side effects.

Literature Review

Various models of palliative care exist. The Center to Advance Palliative Care (2010) provides valuable leadership for the development of palliative care programs. Many hospitals have developed palliative care consult services that facilitate symptom management and end-of-life decision making with attention to goals of care. Some hospitals have designated palliative care units

Jane Griffith, MSN, RN, GNP, CHPN, is a palliative care nurse navigator and nurse practitioner, Jason A. Lyman, MD, MS, is an associate professor of clinical informatics, and Leslie J. Blackhall, MD, MTS, is an associate professor in the Department of Internal Medicine and medical director of Ambulatory Palliative Care Services, all in the Medical Center at the University of Virginia in Charlottesville. (First submission June 2009. Revision submitted July 2009. Accepted for publication August 2, 2009.)

Digital Object Identifier:10.1188/10.CJON.171-175