

DETAILED CONTENT OUTLINE

1. Patient Care: Life-Limiting Conditions in Adult Patients 18%

- A. Identify and respond to indicators of imminent death
- B. Identify specific patterns of progression, complications, and treatment for conditions related to:
 - 1. hematologic, oncologic, and paraneoplastic disorders (e.g., cancer and associated complications)
 - 2. neurological disorders
 - 3. cardiac disorders
 - 4. pulmonary disorders
 - 5. renal disorders
 - 6. gastrointestinal and hepatic disorders
 - 7. dementia
 - 8. endocrine disorders (e.g., diabetes as a comorbidity)

2. Patient Care: Pain Management 22%

- A. Assessment
 - 1. Perform comprehensive assessment of pain (e.g., verbal vs. non-verbal)
 - 2. Identify etiology of pain
 - 3. Identify types of pain or pain syndromes
 - 4. Identify factors that may influence the patient's experience of pain (e.g., fear, depression, cultural issues)
- B. Pharmacologic Interventions
 - 1. Identify medications appropriate to severity and specific type of pain (e.g., routes, initiation, scheduling)
 - 2. Titrate medication to effect using baseline and breakthrough doses
 - 3. Administer analgesic medications
 - 4. Identify dosage equivalents when changing analgesics or route of administration
 - 5. Administer adjuvant medications (e.g., NSAIDs, corticosteroids, anticonvulsants, tricyclic antidepressants)
 - 6. Identify the need for palliative sedation

C. Non-pharmacologic and Complementary Interventions

- 1. Respond to psychosocial, cultural, and spiritual issues related to pain
- 2. Implement non-pharmacologic interventions (e.g., ice, heat, positioning, distraction)
- 3. Identify the potential benefit of the following non-pharmacologic interventions (e.g., palliative surgery, procedures, radiation, counseling, or psychological therapy)
- 4. Identify the potential benefit of the following complementary and alternative therapies (e.g., Reiki, hypnosis, acupressure, massage, pet therapy, music therapy)

D. Evaluation

- 1. Assess for and respond to complications (e.g., side effects, interactions) and efficacy

3. Patient Care: Symptom Management 24%

A. Neurological

- Apply the nursing process to the following actual or potential symptoms or conditions*
- 1. aphasia
 - 2. dysphagia
 - 3. level of consciousness
 - 4. myoclonus
 - 5. paraesthesia or neuropathies
 - 6. seizures
 - 7. extrapyramidal symptoms
 - 8. paralysis
 - 9. spinal cord compression
 - 10. increased intracranial pressure

B. Cardiovascular

- Apply the nursing process to the following actual or potential symptoms or conditions*
- 1. coagulation problems
 - 2. edema
 - 3. syncope
 - 4. angina
 - 5. superior vena cava syndrome
 - 6. hemorrhage

C. Respiratory

Apply the nursing process to the following actual or potential symptoms or conditions

- 1. congestion
- 2. cough
- 3. dyspnea and shortness of breath
- 4. pleural effusions
- 5. pneumothorax
- 6. increased secretions

D. Gastrointestinal

Apply the nursing process to the following actual or potential symptoms or conditions

- 1. constipation
- 2. diarrhea
- 3. bowel incontinence
- 4. ascites
- 5. hiccoughs
- 6. nausea or vomiting
- 7. bowel obstruction
- 8. bleeding

E. Genitourinary

Apply the nursing process to the following actual or potential symptoms or conditions

- 1. bladder spasms
- 2. urinary incontinence
- 3. urinary retention
- 4. bleeding

F. Musculoskeletal

Apply the nursing process to the following actual or potential symptoms or conditions

- 1. impaired mobility or complications of immobility
- 2. pathological fractures
- 3. deconditioning or activity intolerance

G. Skin and Mucous Membrane

Apply the nursing process to the following actual or potential symptoms or conditions

- 1. dry mouth
- 2. oral and esophageal lesions
- 3. pruritis
- 4. wounds (e.g., pressure ulcers, tumor extrusions, non-healing wounds)

H. Psychosocial, Emotional, and Spiritual
Apply the nursing process to the following actual or potential symptoms or conditions

1. anger or hostility
2. anxiety
3. denial
4. depression
5. fear
6. grief
7. guilt
8. loss of hope or meaning
9. nearing death awareness
10. sleep disturbances
11. suicidal or homicidal ideation
12. intimacy/relationship issues

I. Nutritional and Metabolic

Apply the nursing process to the following actual or potential symptoms or conditions

1. anorexia
2. cachexia or wasting
3. dehydration
4. electrolyte imbalance (e.g., hypercalcemia, hyperkalemia)
5. fatigue
6. hypoglycemia/hyperglycemia

J. Immune/Lymphatic System

Apply the nursing process to the following actual or potential symptoms or conditions

1. infection or fever
2. myelosuppression (i.e., anemia, neutropenia, thrombocytopenia)
3. lymphedema

K. Mental Status Changes

Apply the nursing process to the following actual or potential symptoms or conditions

1. level of consciousness
2. agitation or terminal restlessness
3. confusion
4. delirium
5. hallucination

4. Patient and Family Care, Education, and Advocacy 24%

A. Goals of Care

1. Identify patient/family goals and expected outcomes
2. Develop a plan of care to achieve goals and expected outcomes
3. Evaluate progress toward outcomes and update goals

B. Resource Management

1. Explain Medicare and Medicaid hospice benefits
2. Explain care options possible under private insurance benefit plans
3. Provide education about access and use of services, medications, supplies, and durable medical equipment (DME)
4. Modify the plan of care to accommodate socioeconomic factors
5. Assess and respond to environmental and safety risks (e.g., falls, oxygen)
6. Advise on adaptation of the patient's environment for safety
7. Monitor controlled substances (e.g., use, diversion, disposal)
8. Identify available community resources

C. Psychosocial, Spiritual, and Cultural

1. Assess and respond to psychosocial, spiritual, and cultural needs
2. Assess and respond to family systems and dynamics
3. Identify unresolved interpersonal matters
4. Facilitate effective communication

D. Grief and Loss

1. Encourage life review
2. Counsel or provide emotional support regarding grief and loss for adults
3. Counsel or provide emotional support regarding grief and loss for children
4. Provide information regarding funeral practices/preparation
5. Provide death vigil support
6. Provide comfort and dignity at time of death
7. Facilitate and coordinate support at the time of death (e.g., pronouncement and notification for family and coworkers)
8. Facilitate transition into bereavement services
9. Participate in formal closure activity (e.g., visit, call, send card)

E. Caregiver Support

1. Monitor primary caregiver confidence and ability to provide care

2. Promote family self-care activities
3. Assess and respond to caregiver fatigue or burden

F. Education

1. Assess knowledge base and learning style
2. Assess ability to learn and respond to barriers
3. Teach caregiver skills for patient care
4. Teach the signs and symptoms of imminent death
5. Teach end-stage disease progression
6. Teach pain and symptom management
7. Discuss benefit versus burden of treatment options
8. Teach medication management
9. Evaluate educational intervention and materials for patients and family

G. Advocacy

1. Monitor need for changes in levels of care
2. Identify barriers to communication
3. Facilitate effective communication between patient, family, and care providers
4. Make referrals to interdisciplinary team/group
5. Support advance care planning (e.g., advance directives, life sustaining therapies)
6. Assist the patient to maintain optimal function and quality of life
7. Facilitate self-determined life closure
8. Monitor care for neglect and abuse
9. Facilitate discussions about ethical issues related to end of life

5. Practice Issues 12%

A. Care Coordination

1. Coordinate patient care with other health care providers
2. Delegate tasks to assistive personnel and supervise outcomes
3. Coordinate transfer to a different level of care within the Medicare or Medicaid Hospice Benefit
4. Coordinate transfer to a different care setting

B. Collaboration

1. Collaborate with attending/primary care provider
2. Evaluate eligibility for admission and hospice recertification
3. Encourage patient/family participation in interdisciplinary team/group discussions
4. Participate in development of an individualized, interdisciplinary plan of care with the interdisciplinary team/group
5. Identify needs for volunteer services

C. Scope, Standards and Guidelines

1. Identify and resolve issues related to scope of practice
2. Incorporate national hospice and palliative standards into nursing practice
3. Incorporate guidelines into practice (e.g., American Pain Society, National Consensus Project)
4. Incorporate legal regulations into practice (e.g., OSHA, CMS, HIPAA)
5. Educate the public on end-of-life issues and palliative care
6. Educate health care providers regarding hospice benefits under Medicare/Medicaid
7. Participate in continuous quality improvement activities

D. Professional Development

1. Contribute to professional development of peers, colleagues, students, and others as preceptor, educator, or mentor
2. Identify strategies to address ethical concerns related to the end of life
3. Maintain professional boundaries between patient/family and staff
4. Incorporate strategies for self-care and stress management into practice
5. Participate in professional nursing activities
6. Maintain personal professional development plan
7. Maintain current knowledge of trends in legislation, policy, health care delivery, and reimbursement as they impact hospice and palliative care