

PROVINCIAL PALLIATIVE SYMPTOM MANAGEMENT GUIDELINES

Palliative Care & End of Life Services
Clinical Practice Bulletin



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What is the Purpose?

To provide general palliative symptom management guidance to physicians, nurses, and allied health professionals without a referral to a palliative specialist. The guidelines are based on the most current available literature, a clinician panel, patient voices, and input from First Nation Health Authority nurses.

What Symptoms are Included?

- Symptoms were chosen based on being:
 - physical in nature
 - o common to more than one life-limiting illness.
- Pain (pg 29)
- Fatigue (pg 68)
- Pruritis (pg 89)
- Severe bleeding (pg 110)
- Constipation (pg 134)
- Nausea & Vomiting (pg 167)
- Dysphagia (pg 193)
- Anorexia (pg 213)
- Dehydration (pg 244)
- Respiratory Congestion (pg 261)
- <u>Dyspnea (pg 279)</u>
- Cough (pg 299)
- Hiccoughs (pg 335)
- Twitching/Myoclonus/Seizures (pg 358)
- Delirium (pg 378)
- Other Symptoms (pg 408)
- Refractory Symptoms & Palliative Sedation (pg 411)
- Nurturing Psychosocial & Spiritual Well-Being (pg 433)

PRACTICE PEARLS

TOPIC STANDARD FORMAT

*Definition

Step 1 - Goals of care

Step 2 - Assessment

Step 3 - Possible causes

*Principles of Management

Step 4 - Interventions

Non-pharmacological

Pharmacological

Patient and family education

- *Additional resources
- *Medication table
- *Algorithm
- *Extra tools
- *Resources

First Nations Perspective

- To understand potential impacts of each physical symptom on spiritual, emotional and mental facets.
- Appreciate the impact of past trauma on individuals.
- Utilize traditional remedies and participate in spiritual practices.
- Recognize that a person can be well in one state of life and unwell in another, as per the "wellness wheel" (pg 15).

RESOURCES

BC Inter-Professional Palliative
Symptom Management Guidelines