**Inpatient Palliative Care Consult Service COVID Surge Plan**

**3/22/20**

Order/Page Palliative Care consult – as usual

Palliative Triage (PTOD) Geri Triage (GTOD)

Palliative LIP pool Geri LIP pool

*M-F day: 2 - 1 triage, 1 LIP*

*Sa, Su day: 1 LIP*

*Nights: 0*

*RN*

M-F day: 4 - 1 triage, 2 LIPs, 1 fellow/CHS

Sa, Su day: 2 - 1 triage, 1 LIP

Nights: 1 LIP

SW

2/3 - 1/3

 Volume

 (roughly)

Complex symptom management >80yo

Ecmo >65yo + multi-morbid

Oncology Delirium

<65yo

Triage Priority

A: decision making minutes/hours, unstable patient (“code 98”)

 -COVID+, unstable, any setting (ED, acute, critical)

 -non-COVID, avoid escalation that is not consistent w goals or unlikely to benefit

B: decision making expected over hours/days

 -COVID+, “stable” critically ill vent/ecmo

 -comfort care, not GIP, active symptoms

 -non-COVID, hospice/palliative care coordination w/ community to support discharge

C: decision making overs days/weeks

 -routine palliative care consult

 -comfort care, not GIP, symptoms well managed

Palliative Schedule

LIPs: Five 8s/wk, including weekend; rotating nights

SW: ?

Structure of Day

8:30-9:30am M-F morning report (?7 days/week if/when needed)

1:00-1:30pm M-F midday check-in

(?4:30-5:00 M-F end of day check-in if/when needed)

Epic

-usual active and new consults lists – maintained by PTOD

-“Write Handoff” – everyone’s responsibility

 -date & initials of first contact

 -to-dos

 -care meetings

 -IT ticket pending to give access to SW and Chaplains [ ]jlb

-“iso” column

Communication technology

-Phones:

-for now \*67, personal phones

-ask out re: “mandated” Single Number Reach/Mobile Voice Access vs OHSU phones

-Nexus conference call lines:

-schedule?

-additional lines?

-way to “facetime” without more tech if family w computer?

-Knight $?

Just-in-time Resources

-What?

 -VitalTalk language tips

 -prognostic data

 -virtual care conference tips:

 -can’t use conference line for provider pre-game

 -identify self each time speaking

 -deliberate summarizing (can’t rely on head nods)

-Where?

 -internal: Box

 -external: ?

Symptom Management

-usual comfort care order sets, comfort care PCA

-wean from high flow dot phrase [ ]jlb

-?anticipated med shortages