

# Night and Day: A 24-Hour PCU Coverage Solution

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## BACKGROUND

- Our Wiener Family Palliative Care Unit (PCU) is a 14-bed geographically distinct unit in the Department of Geriatrics and Palliative Medicine.
- We are the primary care team for patients with serious illness receiving complex symptom management, support for establishing goals of care, or comfort-oriented end of life care.
- The PCU is staffed during the day by specialty trained palliative care (PC) physicians, nurse practitioners (NP), social workers, bedside nurses, patient care associates, and a clinical nurse manager.

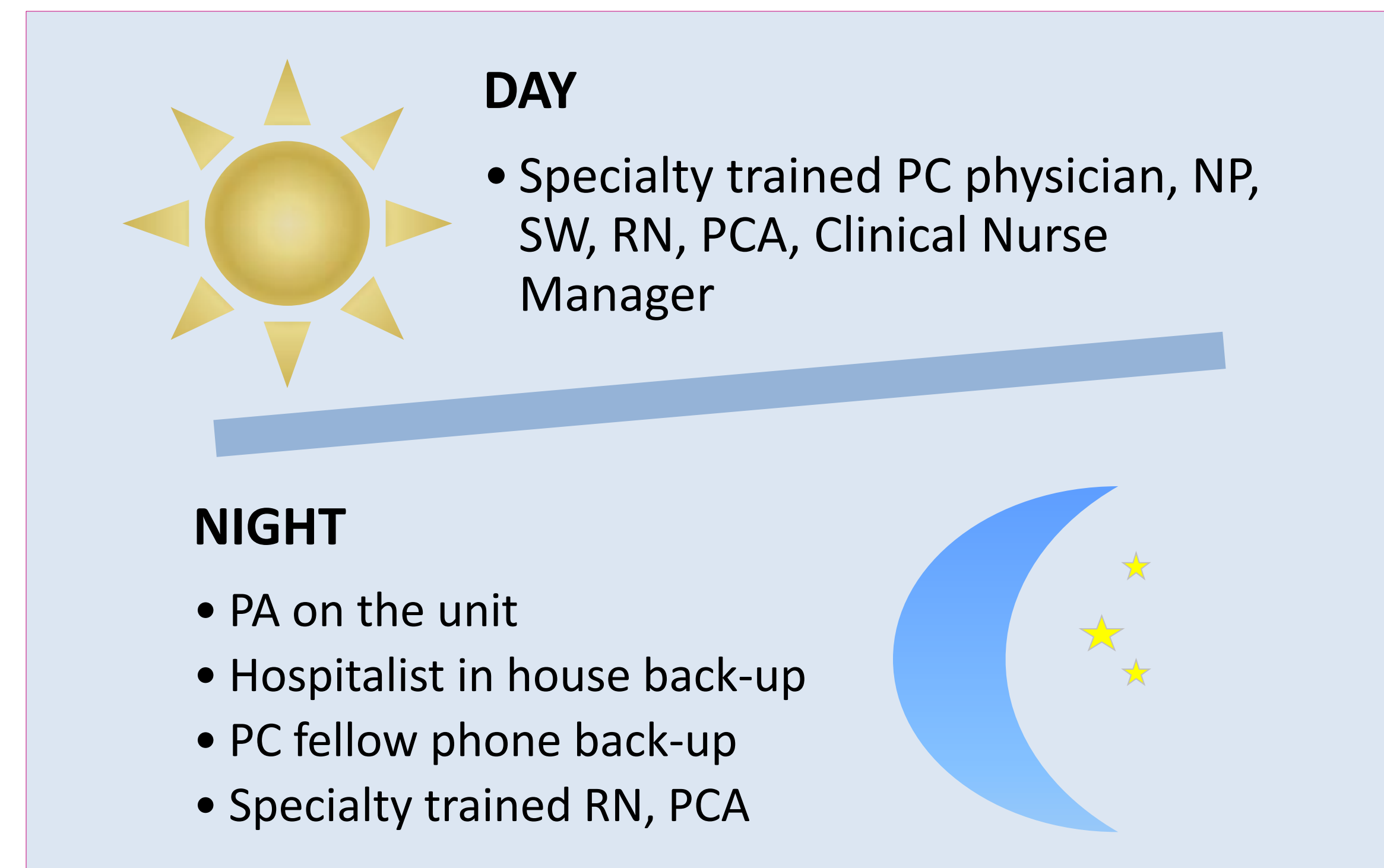
## CASE

- Miss C, a 70 year old woman with gastric cancer metastatic to lung, presenting from the emergency department with dyspnea.
- She was evaluated by our PC consult team, and her goal was to be comfortable and return home with hospice.
- The PC team ordered intravenous (IV) morphine which relieved her dyspnea after two doses, and began a scheduled morphine regimen.
- She was transferred to our PCU and evaluated as comfortable at 4pm by the PC physician and NP.
- **At midnight, however, she became acutely dyspneic, hypotensive, hypoxic, and tachycardic.**

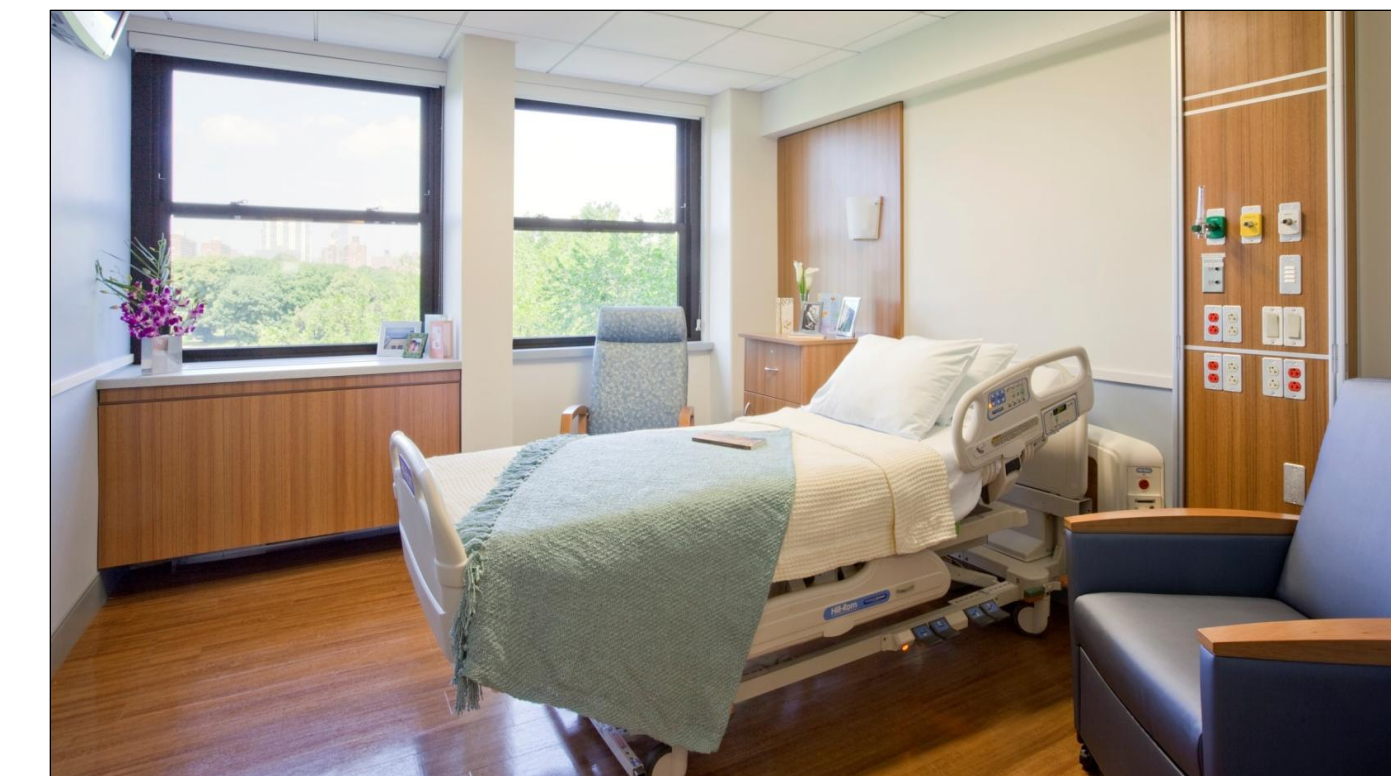
## STAFFING SOLUTION

### How to provide high quality 24-hour coverage?

- We partnered with the Division of Hospital Medicine within the Department of Medicine to provide overnight coverage for our unit.
- Two physician assistants (PAs) were selected to cover the PCU due to their current assignment's proximity to our unit. This allowed for rapid response to patients' and families' needs.



- **Training:** The PAs spent 3 days with PC consult teams, observing family meetings, and completing intensive pain and symptom management training
- **Communication:** A daily handoff email is sent listing code status, contact for family or decision makers, cause of death, clinicians to notify at time of death, and a brief clinical summary for each patient for quick reference



One of 14 private rooms in the Wiener Family Palliative Care Unit at The Mount Sinai Hospital.

## CONCLUSION

Miss C was immediately evaluated by the covering PA, who ordered additional morphine and updated her husband. The PA also paged the PC fellow on call and together, they developed a new regimen that relieved her symptoms. Miss C died comfortably a few hours later, and was pronounced by the PA.

Providing intensive palliative care 24 hours a day is challenge for rapidly growing programs. Partnerships within the hospital can help to ensure the timely delivery of high quality round the clock care to patients while also advancing primary palliative education.

Many thanks to the Wiener Family PCU team, night PAs Rose George and Yves Jean, and the Division of Hospital Medicine.

