Utilizing Standardized Patient Program to Bring Death and Dying Issues to Life

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The myriad issues surrounding the death of a patient are explored during a one-day curriculum that incorporates an interesting mix of reality and simulation. Medical students visit elderly patients in their own homes. Later, they experience the sudden, unexpected “death” of one of the patients during a mock code. They are actively challenged on how best to break bad news; what words to use and avoid; how to comfort someone; how to deal with silence, grief, relief, denial, anger or a sudden exit; who can view the body, and how to appropriately interpret an Advance Directive.

Challenges/Issues:
- Overcoming reticence or discomfort about discussions about terminal conditions and life sustaining treatment, or impending death
- Acknowledging apprehension about interactions with frail or infirm elderly persons and discussions of death and dying
- Developing communication skills for end of life care, including conveying bad news
- Broaching discussion about and appropriately interpreting an Advance Directive
- Understanding how DNR, DNH or POLST are applied in the care of a dying person
- Learning the correct way to complete a death certificate

Educational Objectives/ Participant Outcomes
At the conclusion of this interactive workshop, participants will be able to:
- convey accurate information about Advance Directives and the meaning of DNR, DNH and POLST
- access a ready fund of appropriate words for conveying bad news
- complete death certificates and understand their importance in actuarial use
- explore feelings of discomfort about giving bad news
- address the problem of inadequate preparation for difficult or challenging situations
- demonstrate competency with end-of-life decision making

Rationale or pertinence to medical education/2010 meeting theme (Innovation & Transformation)
- The teaching method incorporates a mix of reality and simulation that allows for greater “willing suspension of disbelief” in a safe, supportive learning mode (i.e., innovation)
- Students remember best in “just in time learning” (i.e., transformation)
- The elderly represent the fastest growing cohort of the U.S. population
- These vital medical competency skills are not often addressed in a “hands-on” fashion

Description of the presentation content
- Introduction
- Break out into small groups for discussion of memorable patients’ deaths and personal experiences
• Discussion of communication skills and how to best convey bad news
• Dialogue on journal articles regarding DNR Orders and Breaking Bad News
• Viewing videos of representative student encounters of different responses to death
• Wrap-up and summary

Innovative aspects of your approach
• Utilizing home visits to real community-residing elders in their own homes with the presence of Standardized Caregivers for interview and follow-up debriefing session,
• Allowing students to take the lead in seeing a patient outside of a clinic or hospital without an attending physician being present
• Use of patient simulator (Stan) in the Simulated Emergency Department, where students run code
• Confronting the “death” of someone just encountered earlier during that day and demonstrating the steps in pronouncing a patient dead
• Giving immediate physician feedback regarding performance during the code, appropriate use of and response to an Advance Directive, understanding of DNR orders and completing the death certificate
• Videotaped segments of students’ attempts at breaking the bad news of the patient’s death to Standardized Caregivers/Family members who respond in various ways.
• Direct feedback in small group with option of reviewing videotaped encounters to discuss, identify and improve students’ communication skills on dealing with various grief reactions, giving comfort to a bereaved person, and how to defuse volatile situations
• Small group debriefing that allows for sharing of personal fears, concerns, failures and successes in a safe, nurturing and supportive learning circle

Outcomes
• After completion of first year of the program, all PCOM graduates have now encountered death and surrounding issues
• Misconceptions addressed on accurate and appropriate use of DNR and AD
• All video encounters from the first year of the program have been viewed by 4 raters, with summary of composite information on the communication skills exhibited by these students
  o Words used for “death”
  o Proper and improper approaches
  o Pitfalls to avoid
  o Dealing with different responses
  o How to improve the outcomes

Involvement of audience in session
• Small group discussion of personal stories of death and dying
• Videos of each SP response to breaking bad news will be viewed, followed by discussion among the small groups and entire participants
• Handouts of questions for discussion
• Journal articles on DNR and on breaking bad news
• Q&A on how best to use this approach in other settings