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A Unique Model for Palliative Care in a Level IV Neonatal Intensive Care Unit

Kelstan L. Ellis DO

Children's Mercy Kansas City, kellis2@cmh.edu

Megan Tucker

Children's Mercy Hospital, mtucker1@cmh.edu

Jennifer Linebarger

Children's Mercy Hospital, jslinebarger@cmh.edu

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A Unique Model for Palliative Care in a Level IV Neonatal Intensive Care Unit

Kelstan Ellis, DO, MS-CR, MBe, FAAP; Megan Tucker, MD; Jennifer Linebarger, MD, MPH, FAAP, FAAHPM

Children's Mercy Kansas City, Kansas City, Mo.

Background

- The Fetal Health Center (FHC) at Children's Mercy Hospital (CMH) allows onsite delivery for infants with prenatally known life threatening or surgical conditions at a freestanding children's hospital.
- Mothers referred to the FHC have a prenatal Integrated Consult (IC) with a multidisciplinary team including specialists relevant to patient diagnosis
- PaCT involvement within the IC allows the team to meet patients prenatally and follow the family throughout pregnancy, delivery and post-natal course

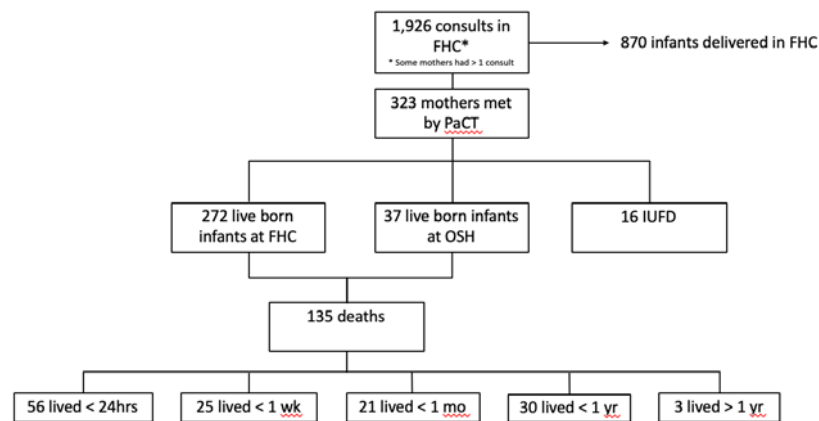
Objective

To describe and quantify the relationship between the FHC and PaCT for program development purposes.

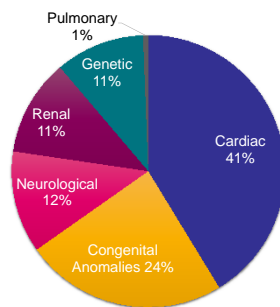
Methods

- Reviewed PaCT database
- Identified all prenatal consults from FHC inception (2010) to 12/31/2017
- FHC database reviewed for cross reference

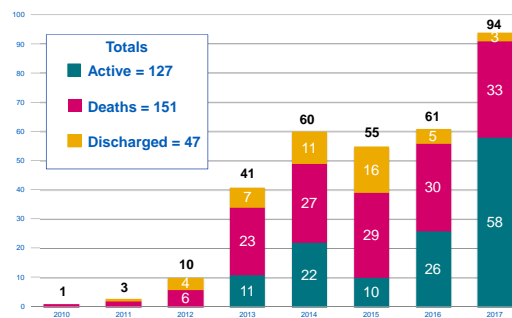
Results



Underlying Diagnoses



Outcomes for PaCT FHC referrals



Results

Neonatologists' Reflections

- Unanimously valued the continuity offered by PaCT
 - "Being on the journey with the family"
 - "Providing an extra layer of support throughout the hospital"
- Growing trust in palliative care approach
 - "Provides a partnership ... in delivering difficult news"
- Normalizes involvement in more than just "the bad cases"

Conclusions

PaCT provides as integral service to families seen in the FHC as evidenced by:

Volume: increasing number of consults over time

Variety:

- A wide range of underlying diagnoses
- A variety of types of support: during an acute crisis, during end of life, or long term continuity

Value:

- Reflected in neonatologists' insights
- Prenatal relationship allows time to build rapport and trust with the family and becomes important when making decisions