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Increasing Palliative Care Team Involvement in Pediatric Hematopoietic Stem Cell Transplant Patients

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Increasing Palliative Care Team Involvement in Pediatric Hematopoietic Stem Cell Transplant Patients

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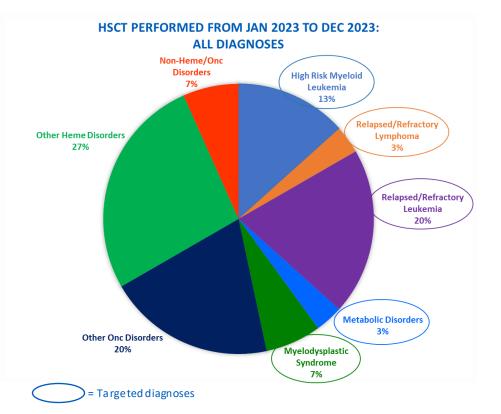
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Introduction

- Palliative care facilitates communication, helps with physical and psychological symptom management, and assists in goals of care and advanced care planning conversations.
- Multiple organizations including the World Health Organization, American Academy of Pediatrics and American Society of Clinical Oncology encourage early palliative care involvement.
- Palliative care involvement with hematopoietic stem cell transplant (HSCT) patients has been shown to be beneficial as HSCT is associated with a high degree of morbidity and possible mortality.

Aim

- Baseline data revealed 48 patients underwent HSCT from July 2020 to July 2022, 25 of whom had a targeted diagnosis (see Methods). The Palliative Care Team (PaCT) was consulted on 12 of the 25 patients (48%).
- The aim was to increase the number of PaCT consults for patients receiving HSCT for our targeted diagnoses from 48% to 75% by December 2023.



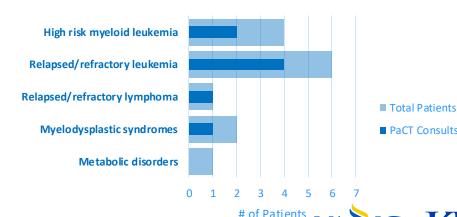
Methods

- Chart review of patients who received HSCT from July 2020 to July 2022
- A targeted diagnosis list was compiled based on which patients were felt to benefit most from palliative care involvement
 - Relapsed or refractory leukemia (ALL, AML, MPAL)
 - Relapsed or refractory lymphoma
 - Myelodysplastic syndrome
 - High risk myeloid leukemias
 - Metabolic disorders
- PDSA Cycle #1 discussion of the project at division meetings, posting flyers in workrooms and education regarding palliative care and evidence of their involvement in HSCT patients.
- PDSA Cycle #2 revision of the HSCT referral form to include "Is PaCT consulted?" If the answer was "no," further information was requested. This intervention coincided PaCT beginning to attend the weekly transplant team meetings to discuss current/upcoming patients.

Methods

- From 1/1/23 to 12/30/23, 30 patients received a HSCT, 14 of whom had a targeted diagnosis. Eight of the 14 patients (57%) had a PaCT consult.
- In total, PaCT met 23 of 46 patients (50%) who received a HSCT since Jan 2023, compared to 20 of 48 patients (42%) who received a HSCT during the chartreview period.

Palliative Care Consults per Targeted Diagnosis in 2023



- Future PDSA cycles
 - barriers to PaCT consultation
 - Add PaCT consultation to the HSCT evaluation order set in the EMR
- Though we did not meet our goal for targeted diagnoses, PaCT has become increasing involved in patients receiving HSCT.
- The long-term goal of this QI project is to make a PaCT consultation standard of care for all HSCT patients.

High Risk Myeloid leukemia Relapsed/refractory leukemia Relapsed/refractory lymphoma Myelodysplastic syndrome Metabolic disorders Other oncologic disorders Other hematologic disorders Non-heme/onc disorders

SCHOOL

The University of Kansas

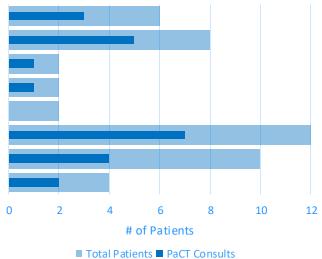
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Conclusions

 As HSCT patients receive more intensive therapy, have frequent deaths in intensive care units and can have limited opportunity for end of life planning due to rapidly changing clinical courses, early integration of palliative care could allow for decreased symptom burden and distress for both patients and families.

Review HSCT referral forms to identify possible





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