COVID-19 Recommendation Aid

This aid provides a framework to create holistic recommendations after a conversation with a patient who has underlying health conditions that put them at higher risk of severe complications of COVID-19, should they contract it. For many patients, these conversations may not result in firm decisions about ventilation or resuscitation. Rather, the goal is to open a dialogue and connect your patient's needs, values, and priorities to therapeutic options.

> "Thank you for sharing that with me. I'd like to reflect together on what you've shared and make a plan moving forward. Would that be ok?"
>
> "I've heard you say that _____ is really important to you. Based on your priorities and what we know about your illness and this current situation with the coronavirus, I recommend…"

Wellbeing (consider the following options)

Share facts about <u>COVID-19</u> and counsel the patient on protective measures to prevent infection.

Assure the patient that you will document and honor what matters most to them.
- Revisit the conversation when needed.
- Involve members of the patient's support system (family, friends) in the next conversation, if the patient desires.

If the patient has urgent distress (e.g. anxiety, depression, isolation) consider:
- Referrals to social work, palliative care, and/or psychiatry.
- Involving other members of the patient's medical care team in the next conversation.
- Having additional discussions to clarify next steps.

Ask the patient to identify someone they trust to make decisions if they can't (called a healthcare proxy), and encourage them to have a conversation with their decision-maker.
- The goal is for the patient to identify a loved one they trust to make medical decisions if they are unable and to talk to their loved one about their priorities, values, and preferences.
- Share resources to support patients and families in talking about priorities and preferences, e.g. prepareforyourcare.org.

For patients who may be ready to make decisions, recommend for or against life-sustaining treatments based on the patient's priorities and the medical situation.
> For example: "*Based on what you shared about what's important to you and your desire to avoid treatments that may not benefit and may lead to suffering, I recommend that if you get sick with COVID-19, it makes sense for you to be in the hospital, and we will do everything we can to keep you from getting sicker and to make you feel better. If you get worse and become critically ill with COVID-19, I would recommend that we change the focus of your care to making sure you are comfortable and don't put you in the ICU or on a ventilator.*"

ARIADNE LABS

Illness and care management (consider the following options)

Consider the impact of social distancing on illnesses and well-being.
- While necessary for public health and personal protection, social distancing can lead to isolation and depression for some patients.
- Enact strategies to support those who are isolated (e.g. frequent contact via telehealth with patients and caregivers).
- Involve social work and community resources (e.g. grocery delivery, medication delivery, etc.).

Consider increasing access to home care services (e.g. home-based palliative care).
- Consider **hospice** for those who qualify and have expressed preferences for comfort-focused care.
- Ensure access to comprehensive symptom management and psychosocial and spiritual support.

Consider completing a MOLST/POLST for those with clear preferences: POLST.org is portable across settings and is appropriate for patients of any age with advanced illness. It should be:
- Completed after a conversation with a clinician about the patients' priorities and preferences.
- Signed by the patient or surrogate AND a medical provider (doctor, physician's assistant, or nurse practitioner) to specify patient wishes for:
    - CPR
    - Mechanical ventilation, CPAP, and other procedures
    - Transfer to a hospital

Support System (consider the following options)

Consider who else should be involved to help your patient navigate their worries and to provide support during this difficult and uncertain time.
- Identify the patient's support system and what helps them cope.
- If the patient lacks a support system, refer to social work, chaplain, hospital volunteer, patient advocate, etc.
- Involve members of the patient's support system (family, friends) in the next conversation, if the patient desires.

Help

- "Thank you for taking the time to talk to me about this."
- "Does this sound ok? Is there anything else we should think about?"
- "We will do everything we can to help you through this."