

# The Condensed Memorial Symptom Assessment Tool and Palliative Care Referrals

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## Purpose:

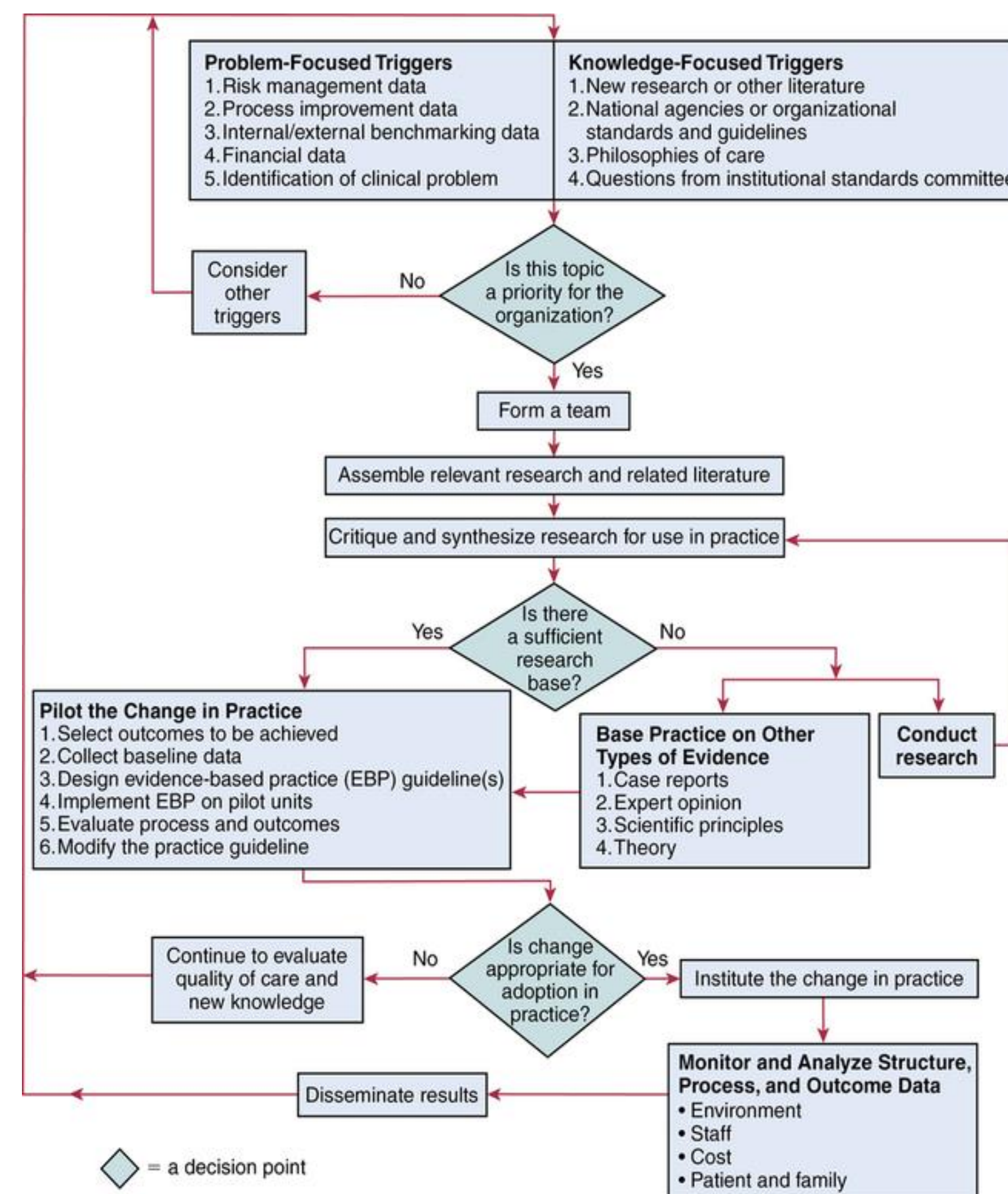
- Implementation of The Condensed Memorial Symptom Assessment Scale (CMSAS) using the IOWA model for evidence-based outcomes.
- A survey was conducted at the end of the study to obtain clinicians' feedback regarding the tool, and if they found it helpful in the ordering of Palliative Care.

## Background:

- Using screening tools can help clinicians have earlier discussions with patients and families regarding palliative care.
- The CMSAS has shown to be a successful tool in the initiation of earlier palliative care referrals (Lam et al., 2008).

## Objectives:

- We implemented the CMSAS tool in an oncology outpatient unit using the IOWA model of Evidence-Based Practice. This evidence-based practice project was aimed at identifying the need to have screening tools in place to increase the timely ordering of Palliative Care.



## Results:

- The CMSAS tool was given to every patient at the check-in process and discussed during their scheduled visit. The clinician would indicate at the bottom of the form if palliative care was considered and if a referral was made. The pilot study was over two months, and 78 patients filled out the CMSAS over that time frame. A survey at the end of the pilot study was presented to the clinicians via Survey Monkey with ten questions regarding the CMSAS tool and its functionality. They felt that the tool helped open the discussion of palliative care. The items on the list did trigger a timelier review, and palliative care was ordered earlier in their treatment plan. They did have a few recommendations so that the tool was specifically geared to their patient population. After completion of the pilot study, the facility has initiated the CMSAS as part of their Electronic Medical Record (EMR).

## Conclusion:

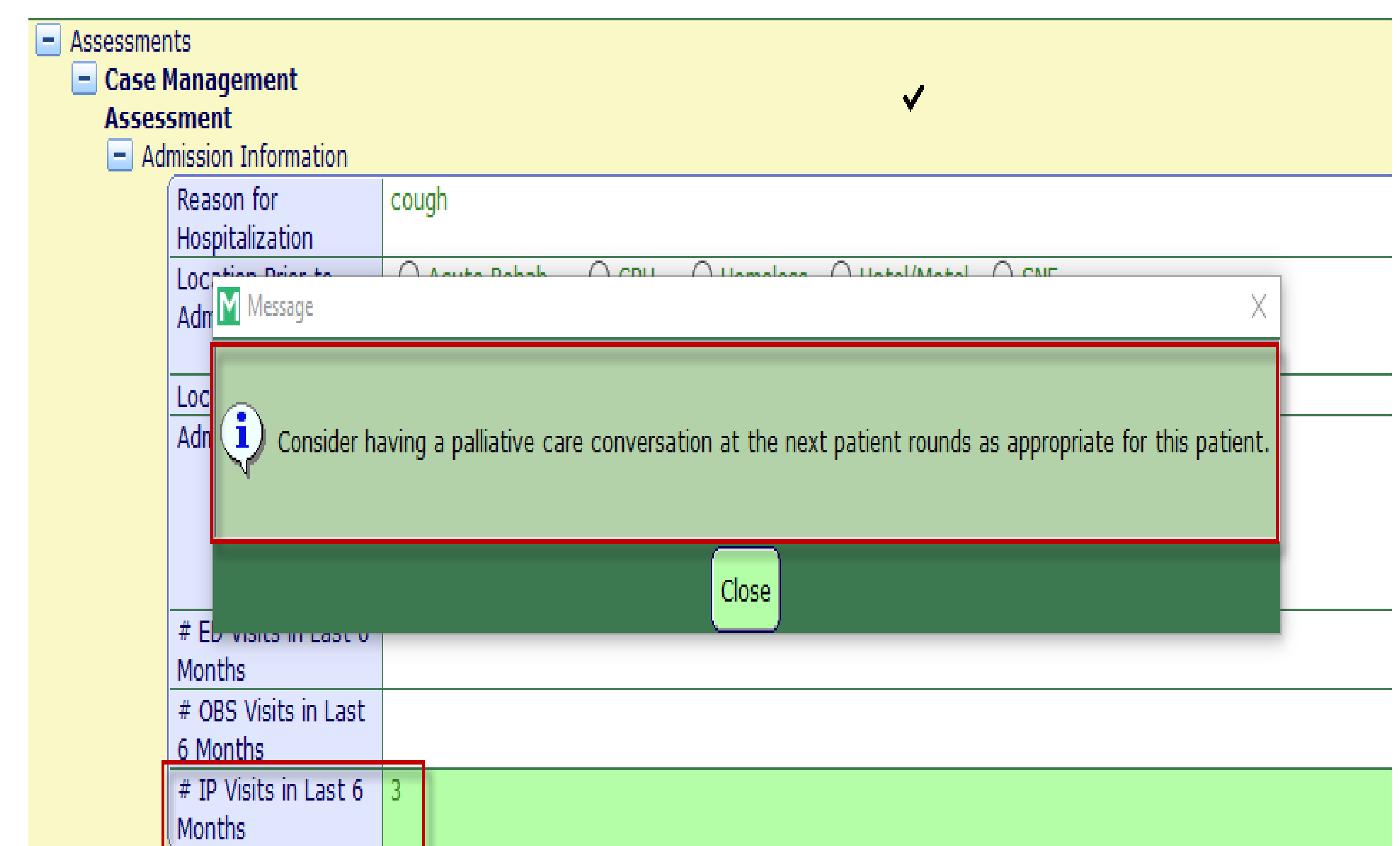
- The implication of this evidence-based project has shown to be effective in breaking down barriers between patients and clinicians. This then facilitates difficult conversations that need to be addressed, and triggered clinicians to order palliative care earlier, thus increasing patients' quality of life.

## Case Management Workflow Process

- Begin on the Worklist and document the Case Management Assessment

### A Case Management Assessment

- If 3 or more IP visits are documented, the following alert displays



## Implications for research, policy, or practice:

- This project will help researchers, and healthcare clinicians standardize the CMSAS tool in all areas of healthcare. It shows evidence-based data, using the IOWA model, that the CMSAS screening tool initiated conversations about palliative care, thus enhancing earlier ordering of palliative care.

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### Condensed Memorial Symptom Assessment Scale (CMSAS)

Patient Name: Last First MI Date:

**Instructions:** Below is a list of symptoms. Please circle either Y or N to indicate whether or not you have experienced the symptom during the last week. If YES, please circle the number that best describes how much this symptom has bothered or distressed you in the past 7 days.

Symptom	Present	N	If the symptom is present, please indicate how much the symptom bothered you.				
			Not at all = 0	A little bit = 1	Somewhat = 2	Quite a bit = 3	Very much = 4
Lack of energy / Drowsy	Y	N	0	1	2	3	4
Lack of Appetit /Weight Loss	Y	N	0	1	2	3	4
Pain	Y	N	0	1	2	3	4
Dry Mouth	Y	N	0	1	2	3	4
Daily Activities / Ambulation	Y	N	0	1	2	3	4
Shortness of Breath	Y	N	0	1	2	3	4
Constipation / Diarrhea	Y	N	0	1	2	3	4
Difficulty Sleeping	Y	N	0	1	2	3	4
Nausea	Y	N	0	1	2	3	4
How frequently did the following symptoms occur?							
Symptom	Present	Rarely = 1	Occasionally = 2	Frequently = 3	Almost Constantly = 4		
Worrying / Feeling Nervous	Y	N	1	2	3	4	
Feeling sad	Y	N	1	2	3	4	

PC information given      Pt declined      PC consult made

## Methods:

- A thorough review of the literature was conducted. Evidence showed that the CMSAS tool is both useful for triggering clinicians to order palliative care earlier in their patients' treatment (Chang et al., 2004).
- Stakeholders were identified, of which three clinicians agreed to participate in the project. The CMSAS tool was given to every patient as part of their outpatient check-in process. The outcome to be obtained was whether the tool triggered the clinician to order palliative care. A ten-question survey, using Survey Monkey, was sent to all three clinicians at the end of the pilot study. This was to determine whether they felt using the CMSAS tool triggered them to order palliative care with their patients.

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