

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to define and differentiate palliative care from hospice	Palliative care patients often suffer from serious conditions with multiple symptoms. Though often the end result leads to death, it is not to be confused with hospice, where death is imminent or predictable in six months or less. Palliative care focuses on providing relief from pain and other symptoms, supporting quality of life.
The learner will be able to define main abilities of the clinical decision support	Electronic clinical decision support is only provided within the electronic health record (EHR) and provides passive and active referential information. Reminders, alerts, and guidelines aid directly in referring patients to optimal care, preventing medication errors, decrease wait times, and ultimately increase quality of care and decrease patient care costs. Clinical decision support, with the correct algorithm within the electronic health record, has the potential to also aid in screening for patients in need for palliative care services.
The learner will be able to define the main idea behind the POLST	The Physician Orders for Life-Sustaining Treatment (POLST) form was developed in Oregon in early 1990s. It does not identify a healthcare agent or durable power of attorney for health care. However, it does discuss the patients beliefs, values, and goals in light of diagnosis, prognosis and treatment alternatives. The POLST enables patients to express their wishes and preferences guiding their care toward end-of-life.