



### **Achy Breaky Heart: Palliative and Hospice Care in Advanced Cardiac Disease (P13)**

This session will examine the palliative and hospice care of adult patients with select advanced cardiac diseases, such as heart failure, valve dysfunction, and malignant arrhythmias. A case base approach will focus on assessment and recommendations related to optimizing symptom management, improving quality of life, and supporting decision making related to the use of life-saving and/or life-prolonging therapies.

#### **Objectives**

1. Relate signs and symptoms of heart failure, valve dysfunction and malignant arrhythmias to the underlying pathophysiology.
2. Use a case base approach recommendations to manage disease, optimize symptom management and improve quality of life in collaboration with cardiac specialists.
3. Discuss strategies for supporting decision-making related to the use and discontinuation of life-saving and/or life-prolonging therapies

#### **Christine Westphal, APRN ACNS-BC ACHPN**

Palliative Nurse Practitioner  
Beaumont Hospital – Dearborn MI

### **Smooth Sailing in Advanced Illness Transitions of Care: Optimizing Medication Management from Palliative Care to Hospice Care (P05)**

Medications play a very large role in the management of chronic and advanced illness. The purpose of this all-day preconference is to grapple with the challenges of medication management within common advanced illnesses. These include metabolic syndrome, heart failure, COPD, dementia, ALS and other disease states. Particular attention will be paid to medication-related issues in transitions of care between palliative care and hospice care, including medication and dosage formulation selection, therapeutic goal setting, monitoring and dosage titration aimed at optimizing symptom control.

#### **Objectives**

1. Use evidence based practice assessment to determine optimal medication therapy in end of life diseases processes.
2. Develop best practices for transitions in care and medication management from palliative care to hospice care in end of life disease processes.
3. Utilize an evidence-based approach to medication prescribing process, including specifically how to discontinue medications for patients with serious illness.
4. Integrate effective communication skills concerning medication management in patients with an advanced illness, with providers, patients, families and caregivers.

#### **Mary Lynn McPherson, Pharm.D., BCPS, CPE**

University of Maryland School of Pharmacy  
Baltimore, Maryland

## **The Language We Cry In: Applying Culturally Effective Care at End of Life (P19)**

You can speak another language; you can live in another culture. But to cry over your dead, you always go back to your mother tongue; the language you cry in. It is understood that there are wide variances among cultures in how we process grief. These variances are often subtle and challenging to recognize and are fundamental to how a culture feels and behaves about end of life decisions and care. This session will detail factors that influence the diverse cultural values, beliefs, and traditions of end of life healthcare practices; adapt end-of-life culturally effective care delivery techniques through utilization of cultural interviewing methods and case study discussions; and collaborate on constructing culturally effective plans for end of life care delivery.

### **Objectives**

- Detail factors that influence the diverse cultural values, beliefs and traditions impacting end-of-life health care practices
- Adapt end of life culturally effective care delivery techniques through utilization of cultural interviewing methods and case discussions
- Collaborate on constructing culturally effective care plans for end of life care delivery in the Gullah Culture, the foundation of African Cultural Heritage

### **Julie Tanner, BSN RN-BC CHPN**

Education Specialist, HPNA, Pittsburgh PA

### **Edda L. Fields-Black, PhD**

Associate Professor, Department of History  
Carnegie Mellon University, Pittsburgh PA