

MDS Alert

Tool: Learn These ABCs of End-of-Life Care

CMS suggests this short cut to covering the essentials of end-of-life care planning.

Adapt the ABCDE mnemonic below to help manage residents' symptoms and meet the residents' physical and emotional needs at the end of life:

A: Ask the resident or his or her legal representative about (and screen for) pain and other symptoms related to the resident's end of life status on admission and periodically thereafter.

A: Assess regularly and systematically for symptoms (such as dyspnea, fatigue, declining function, anorexia/eating difficulties/weight loss, pain, loneliness, anxiety/apprehension, depression, constipation, and delirium) and their impact on the resident.

B: Believe the resident's report of pain or other symptoms, what precipitates it or makes it worse, and what relieves it.

C: Choose symptom control options that are appropriate for the resident.

D: Deliver interventions in a timely, logical, and coordinated manner.

E: Empower the resident to participate in defining the goals of treatment and planning the interventions to the extent possible; and

E: Evaluate the effectiveness of the chosen interventions.

Source: Centers for Medicare & Medicaid Services, Survey and Certification Memo, Ref: S&C 12-48-NH (originally from Agency for Health Care Policy and Research, 1994, Clinical Practice Guideline No. 9: Management of Cancer Pain.