Serious illnesses can often overwhelm your patients and their families. Palliative care relieves physical and emotional suffering and provides tools for a better quality of life. It can also be used in combination with curative treatments.

Palliative care has increased by 148 percent since 2000, with approximately 24 percent of hospitals having a palliative care team in 2000 to 66 percent of hospitals in 2010. Caregiving burdens and the increase of serious and chronic illness have all contributed to this steady rise.¹

Multi-disciplinary Team

Palliative care supports the primary provider and their goals, and does not replace them. The relationship remains between patient and the primary care team, but is enhanced through an expanded support team of specialists. It brings together a multi-disciplinary team to help provide symptom relief and psychosocial support.

This team may include:
- Physicians
- Psychologists
- Nurse practitioners
- Therapists
- Social workers
- Pharmacists
- Nutritionists
- Spiritual advisors

Key aspects of palliative care are:
- Open communication between your patient, their family/caregivers, and the medical team
- Coordination of care between all healthcare providers and the patient
- Pain and symptom management
- Social, emotional, and spiritual support
- Support of family members and caregivers
- Discussions regarding goals of care and advance care planning
- Grief education and support

When is it appropriate?

It is appropriate at any stage or any age in a serious illness. It is never “too early” to start palliative care for your patients with a serious illness.

Palliative care:
- Does not depend on whether your patient’s condition can be cured
- Is differentiated from end-of-life or hospice care
- Can improve your patient’s quality of life
- Is especially helpful for your patients with chronic conditions or advanced diseases
- Is part of the continuum of comprehensive patient care

¹ Center to Advance Palliative Care.
Consider a referral to Palliative Care Services if your patient has a:
- Severe illness
- Chronic or severe physical pain
- Emotional or spiritual distress
- Trouble understanding his/her medical situation
- Conflict among family members regarding patient care
- Questions about advance directives, durable power of attorney, or living wills
- Questions about hospice services
- Questions about the Washington State Death with Dignity Law

How do I start?

Find the closest palliative care team to you. If within a hospital system, they have an inpatient team. Otherwise, go to the Palliative Care Provider Directory of Hospitals: www.getpalliativecare.org/providers/wa/
Clinician resources: www.getpalliativecare.com/clinicians

Coverage

There are no specific criteria for coverage. Palliative care is covered by:
- Most insurance plans
- Medicare
- Medicaid
- Often through financial assistance for those who are under-insured.

There is no pre-set limit for specific medical interventions (medications, chemotherapy, pain therapy, etc.) and their payments (as opposed to certain limitations with hospice services).

Helpful Resources

- The Center to Advance Palliative Care: www.capc.org
- National Cancer Institute — Palliative Care in Cancer: www.cancer.gov/cancertopics/factsheet/Support/palliative-care
- Washington State Hospice and Palliative Care Organization: www.wshpco.org

To access more resources or to learn more about palliative care efforts in Washington state, go to: www.wacancer.org/TASKFORCES/SURVIVORSHIP.aspx

Palliative care is about living life fully while dealing with the uncertainties of serious illness. The palliative care team supports you and your family in living the best life possible.

— Dr. Stu Farber