

End of Life Care/Medical Assistance in Dying: The Case of T. Eckert

Supplementary Materials

Patient Chart with Medical Administration Record (MAR)

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Simulation Grant**

Client Profile				
Last name:	Eckert		First name:	Terry
Gender: Any	Age: 78	Ht: 180cm	Wt: 85 kg	Code Status: DNR
Spiritual Practice: Spiritual but not religious		Ethnicity: Canadian		Primary Language spoken: English
Past History				
Hypertension x 20 years				
Primary Medical Diagnosis		End Stage (Stage IV) pancreatic cancer with metastasis to lungs, liver, and spine		

Review of Systems				
CNS	No cognitive deficits, alert, and oriented X 3			
Cardiovascular	Within normal limits, on Ramipril and Metoprolol for hypertension			
Pulmonary	Metastatic cancer, decreased air entry to bases, occasionally gets SOBOE			
Renal/Hepatic	Within normal limits			
Gastrointestinal	Poor appetite, abdominal pain, nausea			
Endocrine	Within normal limits			
Heme/Coag	INR 1.4			
Musculoskeletal	Generalized weakness, risk for falls, ongoing pain due to metastases in spine			
Integument	Pale			
Developmental Hx	No significant issues			
Psychiatric Hx	Within normal limits			
Social Hx	Has a partner of 55 years, three adult children and 7 grandchildren			
Alternative/ Complementary Medicine Hx			None	
Medication allergies	NKA		Reaction:	None
Food/other allergies:	NKA		Reaction:	None

Laboratory, Diagnostic Study Results					
Na:140 mEq/L	K: 3.3 mEq/L	Cl: 102	Glucose: 6.1	BUN: 11	Cr: 155
ALP: 180 IU/L	AST: 54 IU/L	ALT:403 IU/L	Total Bili: 70 mmol/L		
Hgb: 122 g/L	Hct: 0.4 L/L	Plt: 334	WBC: 12.7	RBC: 3.8 cell/mcL	
PT: 12	PTT: 34	INR: 1.4	Albumin: 19 g/L	LDH-4: 350 IU/L	

Current medications	Drug	Dose	Route	Frequency
	Ramipril	10 mg	By mouth	Twice a day
	Metoprolol	50 mg	By mouth	Twice a day
	Hydromorphone pump	1 mg/hr.	IV, infusion	Continuous
	Hydromorphone	0.5 mg	IV	Every 20 minutes, PRN
	Dexamethasone	4 mg	IV	Daily
	Ondansetron	8 mg	IV	Every 8 hours
	Acetaminophen	500-1000 mg	By mouth	Q 6h PRN (max 3g/day)
	Polyethylene Glycol 3350	17 g	By mouth	Daily
	Senna	2 tabs	By mouth	At bedtime
	Senna	2 tabs	By mouth	Daily, PRN

Client Name: T. Eckert DOB: September 10 Age: 78 years old MRN#: 1934104		Diagnosis: Stage IV Pancreatic Cancer
No Known Allergies		
Date	Time	HEALTH CARE PROVIDER ORDERS AND SIGNATURE
T -1 Month	1800hrs	Admit to Oncology Palliative care
		Vital Signs every 12 hours and PRN
		CBC and Full Metabolic Panel (done)
		Abdominal CT (entered and done)
		Insert IV, infuse normal saline at 30 cc/hr (done)
		Ramipril 10 mg by mouth once daily
		Metoprolol 50 mg by mouth twice daily
		Hydromorphone 1 mg/hour infusion by pump
		Hydromorphone 0.5mg IV every 20 mins as needed
		Dexamethasone 4 mg IV once daily
		Ondansetron 8mg IV every 8 hours
		Acetaminophen 500-1000 mg every 6 hrs as needed for pain or fever >39
		Polyethylene Glycol 3350 17 g by mouth daily
		Senna 2 tabs daily at bedtime
		Senna 2 tabs once daily PRN for constipation
		Dr. K. Choi
T -1 DAY	0800	Move to comfort measures only
		Discontinue vital signs, bloodwork, imaging
		Spiritual care referral (done)

		Social work referral (done)
		Dr. K. Choi

Client Name: T. Eckert DOB: September 10 Age: 78 years old MRN#: 1934104			Diagnosis: Stage IV Pancreatic Cancer
Date	Time	Discipline	Clinical Notes
T-1 Month	Adm	Physician	Admission Summary: T. Eckert is a 78-year-old with a diagnosis of Stage IV pancreatic cancer with metastasis to liver, lungs, and spine. Client was admitted for worsening pain, nausea, weakness, loss of appetite and extreme fatigue. Client has had a discussion with their oncologist who shared that there are no longer active treatments. The oncologist referred the client to the palliative care team for goals of care, symptom management, and end of life options. On admission, the client independently expressed interest in being assessed for MAiD and their oncologist has completed a referral to the hospital's MAiD program. The client completed their written request for MAiD. Client is having significant generalized body pain and nausea, and the palliative care team will continue to provide symptom management and support.
T-14 days		Team	Client has gone through the screening process and application and has been confirmed to receive MAiD, date to be determined. Client originally wanted to be at home to receive MAiD but has since changed their mind and wishes to remain in hospital for management of care. Although the client's partner is upset and saddened by the decision, they remain supportive.
Today		Nursing	Client received a dose of Dilaudid 0.5 mg 90 mins ago and Ondansetron 8 mg for complaints of nausea. Client and partner have just had a meeting with the Palliative care and MAiD team.
Today		Spiritual Care	Client was seen as requested by attending physician re: spiritual care. Client has a friend who will be supporting client/family in provision of spiritual care before, during and after MAiD procedure. Client was appreciative of the visit and expressed their clear wish for MAiD. P Hakim, Chaplain
Today		Social Work	Met with client this afternoon upon request from the attending team. Client shared that they will be undergoing MAiD procedure in two days. Client states all arrangements for before, during and after have been made. Client requested resources for family regarding grief and bereavement support in the community. Social work will

			connect with family members and provide support as needed, along with a list of available resources requested. Will continue to follow. H Jameson, MSW
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Client Name: Eckert T
 DOB: Sept 10
 Age: 78 years old
 MRN: 1934104

Medication Administration Record

		Date: T-1	Date: Today	Date:	Date:	Date:	Date:
Medications	Time given	initials	initials	initials	initials	initials	initials
Drug: Metoprolol	0800	TA	TA				
Dose: 50 mg							
Route: By mouth	2000	SG					
Frequency/Time Due: Twice daily							
Drug: Ramipril	1000	TA	TA				
Dose: 10 mg							
Route: By mouth							
Frequency/Time Due: Once daily							
Drug: Hydromorphone	1000	TA	TA				
Dose: 1mg/hr							
Route: IV Infusion	2200	SG					
Frequency/Time Due: Continuous							
Drug: Dexamethasone							
Dose: 4mg	1000	TA	TA				
Route: IV							
Frequency/Time Due: Once daily							

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Medication Administration Record

		Date: T-1	Date: Today	Date:	Date:	Date:	Date:
Medications	Time given	initials	initials	initials	initials	initials	initials
Drug: Ondansetron	0800	TA	TA				
Dose: 8mg	1600	TA					
Route: IV	2359	SG					
Frequency/Time Due: Every 8 hours							
Drug: Polyethylene Glycol 3350	1000	TA	held				
Dose: 17 mg							
Route: By mouth							
Frequency/Time Due: Once daily							
Drug: Senna							
Dose: 2tabs	2200	SG					
Route: By mouth							
Frequency/Time Due: HS							
Drug							
Dose							
Route							
Frequency/Time Due							

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PRN MEDICATION ADMINISTRATION RECORD

	Date: T-1	Date: Today	Date:	Date:	Date:
Medications	Time given/initials	Time given/initials	Time given/initials	Time given/initials	Time given/initials
Drug: Hydromorphone		TA (90 mins ago)			
Dose: 0.5mg					
Route: IV					
Frequency/Time Due: Every 20 mins PRN for pain					
Drug: Acetaminophen					
Dose: 500-1000 mg					
Route: By mouth					
Frequency/Time Due: every 6 hours PRN for pain or fever					
Drug: Senna					
Dose: 2 tabs					
Route: By mouth					
Frequency/Time Due: once daily					
Drug:					
Dose:					
Route:					
Frequency/Time Due:					