



PATHWAY FOR NICU PATIENTS

1. PATIENT IDENTIFICATION

Primary attending physician/fellow/team:

- identifies babies/families in need of palliative consult
- refers for consult and discuss case with NCCP medical director (NCCP-MD)
- introduces NCCP-MD or mentions to family about this consult, as extra layer of support

2. INITIAL EVALUATION

NCCP-MD engages in 1st conversation with family and:

- assesses prognostic awareness, hopes and worries looking at the future
- provides recommendation including introducing the Team (*)
- documents conversation in baby's chart (palliative care note)
- reports to primary medical team
- reports and discusses with team the initial evaluation, plans for team interventions and follow-up conversations

3. PLAN OF CARE

Team members, in conversation with family, plan and administer interventions (4 domains):

- Bonding (touch, holding, skin-to-skin, positioning, etc.) nurse
- Feeding (nutritive or not) speech pathologist and breastfeeding specialists
- Memories (imprints, pictures, etc.) child life specialist
- Parental support (emotional, psychological, spiritual) social worker, psychologist, chaplain

4. CONTINUATION OF CARE

- Team members meet once/week to discuss patients.
- MD (and any other team member if available) continue conversation with primary team

(*) TEAM: nurse, social worker, child life specialist, speech pathologist, lactation consultant, psychologist, chaplain