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#### **Authors**

Stanich, Jessica  
Ginsburd, Alexander  
Loprinzi-Brauer, Caitlin  
[et al.](#)

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## 5 Teaching Palliative Care to Emergency Medicine Residents Using Deliberate Practice-Based Simulation Format: LIVE DIE REPEAT

Jessica Stanich, Alexander Ginsburd, Caitlin Loprinzi-Brauer, Cory Ingram, Fernanda Bellolio, Kharmene Sunga, Daniel Egan

**Learning Objectives:** 1. Recognize a new format to teach end-of-life care. 2. Review the perception of learners using a serious-game framework to learn rapid discussion about goals of care.

**Introduction:** Emergency departments (ED) care for many patients who are chronically ill and nearing end of life. Establishing goals of care and code status in the ED is an essential skill for Emergency Medicine (EM) residents but is challenging to teach.

**Educational Objectives:** To develop EM residents' ability to: 1) identify patients in need of a goals-of-care discussion; 2) interpret advance care planning documents; 3) efficiently conduct an informed code status discussion; and 4) manage the actively dying patient.

**Curricular Design:** High-fidelity simulation was utilized to replicate the experience of caring for a critically-ill patient in the high-stress ED environment. The scenario involved a live standardized patient with stage 4 pancreatic cancer presenting with sepsis due to pneumonia and who had the goal of comfort-focused care. The simulation utilized the Live-Die-Repeat format, which is a serious-game scheme in which learners are allowed infinite opportunities ("lives") to progress through a single patient scenario. If learners complete the predetermined critical actions, the game is paused and there is a debriefing to reinforce knowledge and skills before resident's progress to the next stage of the simulation. Conversely, if learners do not complete critical actions, the game is over and learners must undergo remedial debriefing before they repeat the scenario they previously failed.

**Impact/Effectiveness:** Eighty percent (16/20) of the residents completed a Simulation Effectiveness Tool-Modified survey and 100% strongly or somewhat agree the simulation improved their skills and confidence at the end of life including: better prepared to respond to changes in condition, more confident in assessment skills, teaching patients, reporting to the medical team, empowered to make clinical decisions, and ability to prioritize care and interventions (Figure). Comments emphasized the impact of simulation on their ability to have a goal of care discussion (Table).

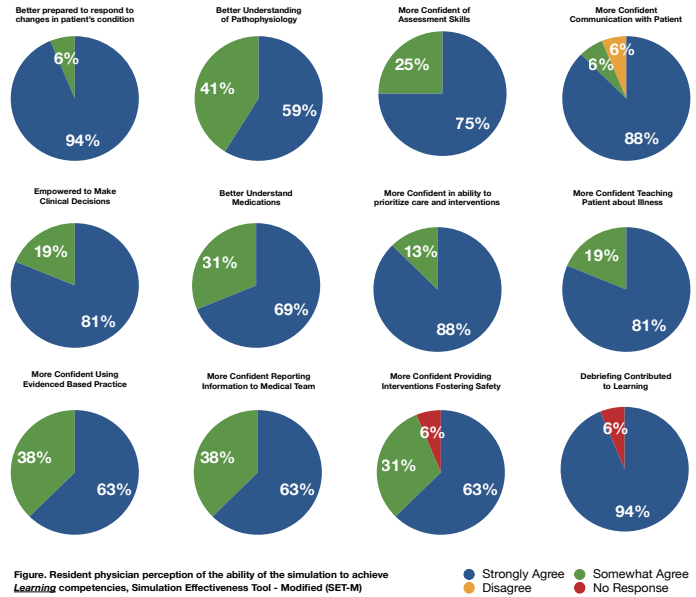


Figure. Resident physician perception of the ability of the simulation to achieve Learning competencies, Simulation Effectiveness Tool - Modified (SET-M)

Table. Resident physician participant comments.

Resident Physician	Comments
1	Excellent SIM, highly valuable and applicable to personal and professional life
2	This simulation was incredibly useful to help learn strategies to facilitate goals of care discussion and end of life care. It has significantly improved my confidence in addressing end of life discussions and helping patient and families through end of life discussion and care.
3	Absolutely fantastic session. So well organized, loved the live die repeat format, LOVED the special guests and their contributions, and the entire discussion was so thoughtful and supportive. Absolutely loved it.
4	The framework provided for addressing palliative care in the ED was helpful. Some of the phrasing like "best care possible" was also helpful.
5	This was an outstanding simulation of a vital and commonly encountered but uncommonly taught scenario. Palliative care skills are rarely tested on paper but are among the most valuable skills to improve for the benefit of our patients, our patients' families, the teams we lead, and ourselves.
6	It was such a unique opportunity to learn that we are so grateful to have had during residency. It is training that is crucial to our curriculum!
7	What an incredible experience overall. I never anticipated learning so much about palliative care in one day. You definitely sparked an interest in me in something that I previously hadn't thought much about. Thank you all for taking the time to put this together
8	Very effective to increase my skills to have meaningful goals of care discussion.
9	It was fantastic.
10	Thank you for focusing on this often-neglected part of patient care. Just the next shift after my SIM I had 2 opportunities to put what I learned into action, to the patient's benefit. It makes me think of how many opportunities I may have missed before the SIM gave me the confidence, tools, and scripting for these end of life decisions.
11	It was an excellent way to hone in on the difficulties of end of life care in the emergency department. Far better than any lecture could have ever been.