

## **Community Hospice - Interdisciplinary Group (IDG) Meeting Note**

**Hospice Diagnosis:** Terminal Lung Adenocarcinoma (WT, PD-L1 low)

**Date of Hospice Admission:** January 10, 2023

**Current Location:** Home

**Primary Caregiver:** Husband (John Miller)

**Code Status:** DNR

### **Review Since Last IDG (Feb 1, 2023):**

Ms. Miller continues gradual decline. Spending ~80% of time in hospital bed now set up in living room. Intake remains poor, tolerating sips of fluids and occasional bites of soft food (pudding, ice cream). Fatigue is profound. Husband reports she sleeps most of the day.

### **RNCM Update (Sarah Jones):**

- **Pain:** Reasonably controlled on current regimen (MS Contin 30mg BID + MSIR 15mg PO q2-3h PRN). Husband administers PRNs 2-3 times/day, mostly for positional discomfort or during care. Patient drowsy but arousable, able to state pain level usually 2-4/10. Bowel regimen (Senna-S BID, Miralax daily) is effective, last BM yesterday.
- **Dyspnea:** Using O2 @ 2L NC continuously via concentrator. Occasional episodes of increased WOB managed with MSIR 5-10mg SL PRN (used 1-2x/day). No acute respiratory distress noted on visits (2x/week). Lung sounds diminished bilaterally, scattered crackles R base.
- **Skin:** Intact. Turning/positioning schedule maintained by HHA and husband. Egg crate mattress on bed.
- **Meds:** Tolerating oral meds crushed in applesauce/pudding. Husband managing administration well.

### **Social Work Update (Mark Smith):**

- Husband (John) showing signs of increasing caregiver fatigue but remains committed to caring for Patty at home. Expressed anxiety about "what happens at the very end." Provided education on signs/symptoms of actively dying process and reassurance regarding 24/7 hospice support. Reviewed available respite care options, but family declines at this time. Connected John with bereavement counselor for pre-bereavement support. Financial/legal affairs appear in order (POA, Will discussed previously).

### **Chaplain Update (Chaplain Dave):**

- Visited twice since last IDG. Patient minimally responsive during last visit but seemed calm with prayer/presence. Husband finds spiritual support visits helpful, engages actively. No outstanding spiritual needs identified by family currently.

### **Volunteer Update:**

- Volunteer assigned, visiting 1x/week for caregiver respite (sits with patient while husband runs errands). John reports this is very helpful.

### **Hospice Medical Director Review (Dr. Martin):**

- Patient follows expected trajectory for terminal lung cancer. Current symptom management appears appropriate and effective (pain, dyspnea). Prognosis remains poor, likely weeks. No indication for medication changes unless symptoms escalate. Reviewed and agrees with current POC.

#### **Brief Review of Oncologic History (for context):**

- Dx Stage IV Lung Adeno (Oct 2020). Mets to contralateral lung, bilateral adrenals. WT, PD-L1 TPS 10%, CPS 15, IC 1/+.
- 1L: Carbo/Pem/Pembro (Oct 2020 - Aug 2021). Progression.
- 2L: Docetaxel (Sept 2021 - Feb 2022). Some initial stabilization, then progression + toxicity.
- 3L: Gemcitabine (Mar 2022 - June 2022). Minimal benefit, significant fatigue/cytopenias.
- Best Supportive Care: July 2022 - Jan 2023. Transitioned to Hospice Jan 2023.

#### **Plan of Care (Next 2 weeks):**

1. **RNCM:** Continue 2x/week visits & PRN. Continue monitoring pain/dyspnea/skin. Titrate opioids/adjuvants as needed for comfort. Continue caregiver education/support, especially regarding end-of-life signs.
2. **HHA:** Continue 3x/week visits for personal care assistance.
3. **SW:** Continue 1-2x/month visits & PRN. Focus on caregiver support, anticipatory grief.
4. **Chaplain:** Continue visits as desired by family.
5. **Volunteer:** Continue weekly respite visits.
6. **MD:** Review PRN. Available for consultation.

#### **Follow up**

- Patient died February 28 2023

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L. Martin, MD (Hospice Medical Director)

**Patient:** Miller, Patricia Ann ("Patty")

**MRN:** SYN027 **DOB:** 04/01/1955

**Date of IDG Meeting:** February 15, 2023

**Attendees:** Dr. L. Martin (Hospice MD), Sarah Jones RNCM, Mark Smith SW, Chaplain Dave, Volunteer Coordinator