

# COVID-19 CONVERSATIONS

## Talking with COVID-19 Positive Patients Recovering at Home



Adapted from [VitalTalk](#), here is a suggested script for goals of care discussions for COVID-19 positive patients recovering at home.

### Check in to see how the patient is doing.

**Healthcare Provider:** Hi Mr./Ms./Mrs. (Patient). This is (You). How are you doing?

**Patient:** I'm okay, just worried.

### Ask about Coronavirus COVID-19.

**Healthcare Provider:** I understand that you are worried about the Coronavirus COVID-19. These are difficult times. That is why I am reaching out to you today. Have you been taking care of your condition (i.e. congestive heart failure, chemo treatments, hypertension, etc.)?

**Patient:** Yes, I've been doing \_\_\_\_\_.

**Healthcare Provider:** I also understand that you have tested positive for COVID-19.

**Patient:** Yes.

**Healthcare Provider:** I can imagine that when you are dealing with your condition (i.e. congestive heart failure, chemo treatments, hypertension, etc.) already, hearing about being positive for COVID-19 must be worrisome.

**Patient:** Absolutely. I've been listening to the news nonstop. I am really worried, and it is all so confusing.

### Lay out the issues and concerns.

**Healthcare Provider:** It is confusing and there is a lot of different information. I also want to make sure that I am able to meet your goals and give you care that makes sense for you. Could we talk about that?

**Patient:** Okay. I haven't been sure what to think.

**Healthcare Provider:** Even when people get COVID-19, many have mild to moderate illness and don't need to be in the hospital. This is the better case scenario as people are able to stay home and treat COVID-19 like a virus with fluids, rest, and Tylenol for fever. I'm hoping your case of COVID-19 turns out to be mild and you are able to stay home.

**Patient:** Me too.

**Healthcare Provider:** I worry that if your COVID-19 becomes severe, there is a high chance that it would be life threatening because of your pre-existing condition (congestive heart failure, hypertension, cancer, etc.). At this time, the hospital is going to be a very different place and I want to make certain that your wish would be to have aggressive care in the hospital and not to remain at home with family and focus on comfort. Again, please understand this is a worst-case scenario, but I truly want to ensure that our care meets your needs.

**Patient:** Okay.

**Healthcare Provider:** Going to the hospital may not be the best care for you. Some people in this situation would rather stay at home and have care come to them. There are also other people who wish to go to the hospital for oxygen and IV medications but would not want to have life support machines or things like a feeding tube if needed. The medical team will do everything you wish to be done. To make a decision about your wishes, it's important that you understand what aggressive treatment in a hospital or on a ventilator could mean for you. When we resuscitate and intubate patients, only 17% come back to the same level of function they had before the resuscitation. That statistic is only for those without underlying conditions such as \_\_\_\_\_ without COVID-19. This virus makes this rate much lower and we know that most people with \_\_\_\_\_ (congestive heart failure, COPD, cancer, etc.) who are ventilated have a very poor chance of coming off the ventilator and that they will lose function. This may mean loss of life, independence or being in a nursing home for the remainder of your life. Before we face decisions like that, I want to know what's important to you.

**Patient:** This is so much to think about, I'm just not sure what to do. What would you do, doctor?

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## Talking with Patients at Home (Continued)



### Motivate them and empower them to make the best choice for them.

**Healthcare Provider:** This decision is up to you. I know this is difficult to think about, but it's important to me that I am honest with you. What I would do may not be the same as what you would do. It's important for you to make the best choice for you and your family and loved ones. You can tell me that if your COVID-19 got severe, you would rather not go to the hospital and have care at home. Or you could tell me that you do want to go to the hospital and have limited treatment such as not be placed on a ventilator. You can also decide to come to the hospital and have all the aggressive treatment done to prolong your life. I want to be honest with you about the complications that could happen, though. Whatever you do choose, you can change it at any time. What are your thoughts today?

**Patient:** This is a lot to take in. I am leaning towards not going to the hospital, but I'm not sure.

### Expect emotion and empathize.

**Healthcare Provider:** This is a horrible epidemic, and I wish things were different.

**Patient:** Me too. It's hard to say this, but I don't want to die on a machine.

**Healthcare Provider:** I want to honor your wishes.

**Patient:** Thank you.

**Healthcare Provider:** I respect what you are saying. There is no right or wrong answer. So, I understand you would not want to be on a ventilator. Resuscitation isn't effective without a ventilator so that would mean that if the COVID-19 becomes serious, you would want to have a DNR/DNI in place. Is that correct?

**Patient:** Yes, I think so.

**Healthcare Provider:** Okay, so in respecting your wishes, I want to know if you would want to be placed onto high-flow oxygen and given medications which may or may not be effective in managing this virus when it is serious or if you would like to remain at home and focus on comfort?

**Patient:** I'm not sure if I can answer that right now...

**Healthcare Provider:** That's okay. I think we've done enough for today. Maybe you can talk with your family and I can check back with you in a few days? I'd like to know how you are feeling, too. I would also like to refer you to a palliative care nursing agency to come visit you, check on your symptoms and let me know how things are going. Would that be alright?

**Patient:** Okay, that sounds good. Thank you for talking to me. I have a lot to think about. I think a nurse would be helpful right now.

OR

**Patient:** I would want to stay home. That's not how I would want to live.

**Healthcare Provider:** I understand. Sometimes remaining with family is the best thing for us. If this happened, then you or your family could call me. I would make sure to refer you to a program that can help you with that. Right now, I think you might benefit from a palliative care visiting nurse to help you manage your symptoms and check in on you. Would that be alright?

**Patient:** Yes, I think that would be really helpful.

### Record the conversation and document their choice.

**Healthcare Provider:** I'll write a note in your chart, and make the referrals, okay?

**Patient:** Yes, thank you doctor.