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- Home
- SF STAT!
- <u>Current Articles</u>
- CURRENT ISSUE
- Online Newspapers
- WEEKLY NEWSLETTERS
- Media Kit
- Calendar
- Business Directory
- Video Interviews
- Contact

Select Page

Palliative Care: Ubercommunication and Timeintensive Involvement

Tracy Romanello, D.O., is a unique hybrid of physician. A dual board-certified family practitioner and palliative care physician, she (like most palliative care providers) experienced a loved one's journey through a life-threatening illness. She experienced loss at a young age and was inspired to make a difference in how healthcare is rendered.

Palliative care teams provide a much-needed extra layer of support from a clinical and psycho-social aspect when a patient is diagnosed with a life altering — but not necessarily terminal - disease.

Dr. Romanello is the Medical Director of Catholic Hospice and Catholic Palliative Care Services. Catholic Palliative Care Services is a physician-based practice in partnership with Catholic Hospice at Fort Lauderdale's Holy Cross Hospital, part of Trinity Health. This group of 8 physicians in conjunction with a full-time team of nurse practitioners, social workers, care navigators, chaplains and allied care professionals has recently teamed with the hospital's palliative care program to address the clinical and educational needs of patients who might benefit from this type of care either in a hospital, at home, and eventually with plans for an outpatient clinic.

"Our 'customers' are physicians, patients and their families. We spend time talking to them and listening so patients and their caregivers understand all treatment options and choices. We explore our patients' personal goals in order to match the most advantageous treatment options and coordinate realistic care plans with all involved," Dr. Romanello explained.

According to Romanello, the biggest need is a clear understanding of the differences and overlap between hospice and palliative care.

Hospice is a subset of palliative care that addresses end-oflife clinical and emotional needs. Hospice patients have a life limiting prognosis of six months or less. Palliative care is designed to provide long term advanced planning and expert symptom management alongside curative care plans. These care plans promote patients and families being in control in defining their goals and making healthcare decisions. They are ultimately designed to prolong and to improve the quality of life for patients with severe and chronic illnesses at any age.

Serious or progressive illnesses such as cancer, congestive heart failure, chronic obstructive pulmonary disease (COPD), dementia, Parkinson's, hereditary or age-related diseases are often accompanied by pain, depression, shortness of breath, fatigue, constipation, nausea, loss of appetite, difficulty sleeping, anxiety and other symptoms that cause distress. In addition to medical care to lessen or alleviate the symptoms, palliative experts can provide emotional and spiritual resources to enrich the lives of those receiving care. The palliative team will monitor medications, therapies, nutrition, and social resources (housing, financial, emotional) to address symptoms and help patients gain the strength to carry on and improve the quality of daily life.

Communication and timely intervention are hallmarks of palliative medicine.

"No matter how time-intensive a care plan is, I never look at the clock while talking with my patients," Dr. Romanello said. "Unfortunately, the luxury of time is not commonplace in the reality of medicine today, but a palliative provider makes the time," she said.

The objective is to reconcile all involved with care plan goals to support the patient and empower him/her with control over their life.

Early intervention is beneficial to provide optimal care and a calming peace of mind. "As an advocate for the patient we inquire about plan direction in advance of functional, financial or spiritual status changes. We can then have strategies and steps in place before the stress of the actual change is upon them," Dr. Romanello explained.

Palliative care experts follow patients and their families on a trajectory where choices may be made concerning anything from side effects of medication to de-escalating medical options. Palliative care is available for all ages, treating congenital issues in pediatric patients to age related physical and behavioral health disorders in adults. Significant due to the aging demographics and lifestyles in South Florida, while recognizing the impact on home life in a variety of cultures, patients may live in group homes, assisted living or nursing homes, alone or in a multigenerational home setting, a palliative care plan takes the

entire environment into consideration.

Patient-centric support is core to Holy Cross Hospital values. "Because we are affiliated with Catholic Health Services, we have referral resources to address many 'social gaps' including legal, housing, nutritional, financial, transportation and social services in addition to clinical and spiritual care to impact the quality of life," Dr. Romanello explained.

No doubt, dealing with all aspects of patient care can be taxing, but personal and professional fulfillment is sparked on a daily basis. "We may help simply by holding a patient's hand as they face difficulties or by discharging a patient, feeling in control of their future, thanks to a detailed palliative care plan," Dr. Romanello said.

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- Home
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- CURRENT ISSUE
- Media Kit
- Video News
- Datebook
- Calendar
- Business Directory
- Webinars

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