

**Sample COVID Manifesto:
A Checklist for the Palliative Care IDT**

Intentions:

- Help to identify designated “HCPOA” (healthcare power of attorney) if appointed or appropriate legal surrogate decision maker(s)
- Identifying and respecting the patient’s care preferences (deliver goal concordant care)
- Setting a regular time for in person meetings/set expectations for family
- Helping in defining the major problems initially and as the clinical course proceeds
- Communicating concisely and consistently; setting family expectations

Day 0 (first 24 hours of admit to ICU)

- initially limited to adult parents, spouse, and children OR appropriate HCPOA/surrogate DM (Day 0)
 - ✓ identify HCPOA or SDM (and consistent communicator)
 - ✓ explore existence of living wills or advance directives and incorporate in medical record
 - ✓ explore baseline functional status`
 - ✓ assess for patient’s decisional capacity
 - ✓ discuss what to expect from ICU care and assess previous experience with similar care settings
 - ✓ goals of care as appropriate based on timing and severity of illness

Day 2-3 (48-72 hours after initial admit to ICU)

- subsequent visits limited to only 4 patients of previously mentioned group
 - ✓ provide updates
 - ✓ discuss idea and implementation of **time limited trials**, as appropriate
 - ✓ continue to define expectations and achievable goals of care
 - ✓ goals of care as appropriate based on timing and severity of illness

Day 7

- planned meeting to summarize the previous week, patient progress, and clinical expectations based on the medical specialist’s experience and knowledge of the disease process
 - ✓ Ensure family’s expectations and goals are consistent
 - ✓ Maturation of goals of care to include all options for continued care (current level, medical boundary setting, or discussion of comfort focused care plan)
 - ✓ Discuss recommendations for care based on known patient/family preferences from previous family meetings

***Minimum of subsequent weekly family updates by palliative care to discuss ongoing time-limited trials and further maturation of prognostic discussions with refinement of goals of care based on realistic expectations.