Review assessment, interventions, monitoring, and care for conditions and symptoms commonly encountered in hospice and palliative care, including:

- Agitation in patient who has dementia
- Amyotrophic lateral sclerosis (ALS), dyspnea
- Ascites, peritoneal drain
- Cancer
- Constipation, prevention and relief
- Delirium in patient who has dementia
- Dementia, fall risk; behavioral symptoms
- Distress related to non-physical causes at EOL
- Dyspnea, assessment and use of fan to relieve
- End-stage lung Ca, bone metastasis
- Fatigue, scheduling activities at times of most energy
- Myoclonus
- Nausea, opioid-induced
- Pain management, primary reason for ineffectiveness
- Pulmonary fibrosis, hypoxemia
- Pressure ulcer, staging
- Spiritual distress, assessment
- Upper airway congestion

Review action, procedures, monitoring, and precautions related to medications and treatments commonly used in hospice and palliative care, such as:

- Artificial nutrition and hydration (ANH), efficacy of enteral feedings at EOL
- Atropine
- Benzodiazepines, fall risk in elderly, contraindication in delirium
- Complementary and alternative medicine (CAM), most and least frequent uses
- Gabapentin (Neurontin®)
- Haloperidol (Haldol®), to relieve nausea caused by MS-IR
- Hydromorphone (Dilaudid®)
- Morphine, calculation of oral liquid, calculation IV to sustained release
- Morphine, immediate release and long-acting
- NSAIDs, relief of bone pain
- Opioids, adverse effects
- Oxygen, use in pulmonary fibrosis
Scopolamine
Tiotropium oral inhalation

Review the Hospice/Palliative Model of Care including:
- Spiritual counseling, nurse’s role in arranging for culturally-related spiritual rituals
- Cultural differences in EOL care, such as African American, Native American
- Withdrawing or withholding life-sustaining therapies
- Role of HP team
- Holistic approach
- Importance of patient’s choices and goals
- Symptom relief and ease of burden at EOL

Review principles the grieving process, including:
- Influence of relationship w/deceased upon the grieving process

Review principles and practices related to safety and infection control, including:
- Risk for falling and preventive measures
- Handwashing, c diff
- Prevention of CAUTI
- Prevention of aspiration pneumonia

Review principles and practices of communication with family and caregivers, including:
- Patient satisfaction
- Expectations during last weeks, days, hours of life
- Family communication re: upper airway congestion
- Artificial nutrition and hydration (ANH), response to family

Review Calculations, including:
- Changing route of administration of opioids, such as from IV to PO
- IV drip rate, calculating drops per minute

\[
\text{Volume to be infused (mL) over 1 hour} = \text{gtts/min}
\]

\text{Drop factor constant}

<table>
<thead>
<tr>
<th>Common drop factors</th>
<th>Drop factor constant</th>
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</thead>
<tbody>
<tr>
<td>60 gtt/mL - minidrip set</td>
<td>1</td>
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<tr>
<td>Drip Set Concentration</td>
<td>Drip Set Type</td>
</tr>
<tr>
<td>------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td>10 gtt/mL</td>
<td>regular drip set</td>
</tr>
<tr>
<td>15 gtt/mL</td>
<td>regular drip set</td>
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