



Association for  
Palliative Medicine

# Article of the Month

January 2016

## **Palliative Care Screening and Assessment in the Emergency Department: A Systematic Review**

George N, Phillips E, Zaurova M, Song C, Lamba S, Grudzen C.

J Pain Symptom Manage. 2016 Jan;51(1):108-119

This systematic review included 7 articles addressing palliative care interventions in the emergency department. The interventions assessed in all studies increased palliative care referral, but the study outcomes varied widely and six of the seven studies required additional staff to perform screening for palliative care needs in the emergency department. Standardization of palliative care screening in the emergency department is recommended.

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## **Variations in specialist palliative care referrals: findings from a population-based patient cohort of acute myeloid leukaemia, diffuse large B-cell lymphoma and myeloma.**

Howell DA, Wang HI, Roman E, Smith AG, Patmore R, Johnson MJ, Garry AC, Howard MR.

BMJ Support Palliat Care. 2015 Dec;5(5):496-502.

This cohort study collected information on patients with three haematological malignancies. Of the 323 included patients, 155 (48%) were referred to specialist palliative care, with patients living longer or having myeloma being more likely to be referred. People dying at home or hospice were more likely to have been referred to specialist palliative care services compared with those dying in hospital. The authors suggested further research to explore the reasons for specialist palliative care referral and non-referral, and differences in the preferred and actual place of death.

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*Elaine Boland, on behalf of the APM science committee*