# **My Emergency Contact List:**

Organisation:

## Helping you keep track of your team

My name:	Reminder:
	Put this list on your fridge or somewhere where it can be found.

Relationship/ Role	Name	Phone Number	Contact at time of death? (Y/N)
Partner/friend/ family member			
Substitute Decision-maker			
Specialist			
General Practitioner (GP)			
Nurse			
Pharmacist			
Other			

# Chart of Breakthrough medicines

Patient details
Surname
Title
Given names
DOB MRN
Address
Suburb
Postcode

#### **About Breakthrough Medicines**

Breakthrough symptoms occur for many reasons in people with palliative care needs. This includes symptoms like pain, nausea, breathlessness, and anxiety. Sometimes these symptoms 'break through' the stable control of symptoms that you might usually experience. Your prescriber may prescribe additional medicines to be used as a 'rescue dose' in case this happens.

It is important that you follow the advice given to you about treating breakthrough symptoms. Letting your care team know how much and how often breakthrough medicine is needed helps with management of your symptoms. You can use this chart to keep track of any breakthrough medicine that you or the person you are caring for takes.

<b>1</b> .		
	 licine	

Strength:

How much and how often to be given:

Reason for taking:

Date				
Time				
Dose				
Time				
Dose				
Time				
Dose				
24-hour Total Dose				

How much a		ten to be giv	ven:			
Date						
Time						
Dose						
Time						
Dose						
Time						
Dose						
24-hour Total Dose						
3. Medicine Na Strength: How much a Reason for	and how of	ten to be gi	ven:	T		
Date						
Time						
Dose						
Time						
Dose						
Time						
Dose						
24-hour Total Dose						

2. Medicine Name:

Strength:

## **Medicines List:**

## Helping you keep track of your medicines

My name:
My allergies or previous problems:
My emergency contact(s) details:
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My GP/specialist contact details:
My pharmacy:
My pharmacist(s):
My palliative care team (eg, careworker, nurse):

#### Organisation:



### **Reminders:**

- Ask a member of your care team to help you fill out this form.
- Bring this form to any future medical appointments.
- Include non-prescription medicines.

Name of medicine	What it looks like	How much and when	How to take it	Date started	What the medicine is for
Example only	eg, round, red, blue, white liquid	eg, one capsule per day	eg, by mouth, with food, by injection	dd/mm/yy	eg, pain

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# Information for you and your family

Organisation:

#### Palliative care case conferences

It has been suggested that a case conference be held to discuss how you, or your family member might benefit from palliative care. The following explains what this is and why it is important.

Case conference: Case conferences or family meetings are an opportunity to discuss a person's care needs. They ideally include the person (if able to attend), their family and/or their substitute decision-maker, and members of the care team including the doctor.

**Palliative care**: Palliative care is person- and family-centred care that supports a person to live the best life they can with a life-limiting illness. A life-limiting illness means that the person has little or no prospect of cure and is expected to die. The focus is on quality of life.

Life-limiting illnesses include dementia, advanced heart, kidney, lung or liver disease, cancer, and motor neurone disease.

People can receive palliative care for days or weeks, or for months to years. Older people coming to the end of their life without illness may have some of the same care issues. They can also benefit from the approaches to care taken in palliative care.

Common care issues in palliative care include:

- pain
- dyspnoea (breathing difficulty)
- dysphagia (difficulty with swallowing)
- constipation/incontinence (bowel and/or bladder management)
- depression
- delirium (sudden confusion)
- anxiety
- nausea (feel that you want to vomit)
- fatigue (tiredness).

#### Who should attend a case conference?

Staff in residential aged care facilities and providers of home care often meet with families. If possible, the person receiving care should attend, their GP, and any concerned family members or friends.

Your contact for this case conference is:

Name of staff member:	Role:
Telephone:	

## Self-Care Plan:

### **Family Carer**

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Caring for someone at home at the end of life is complicated and you may find it challenging. The intensity of the caring situation can be hard to deal with. You might find it hard to sleep, feel anxious or worried. Your friends may not visit as often. This can affect you and your family. Selfcare is what we do to maintain balance in our life.

A self-care plan based on what you like to do can help. Here we suggest a few things that you could try, but what you choose will depend on what suits you best.

#### Home self-care - Activities to help you at home

Some examples

Have someone to help with the care so that you can get time for yourself

**Share** an online calendar with family and friends so that they know when you might need help or company

**Find** out about respite services in your area that can be accessed for a few hours or a few days Join a support or training group for carers

Attend training programs for carers

My Activities:

#### Physical self-care - Activities that help you to stay fit and healthy

Some examples

**Develop** a regular sleep routine

Aim for a healthy diet

Take lunch breaks and go for a walk

**Get** some exercise before/after work regularly

My Activities:

Psychological self-care - Activities that help you to feel clear-headed and able to

## Self-Care Plan (continued)

engage with personal challenges
Some examples
<b>Keep</b> a reflective journal
Seek regular meetings with the palliative care team
Make time to be with friends and family
My Activities:
Emotional self-care - Allowing yourself to safely express your emotions
Some examples
<b>Develop</b> friendships that are supportive
Write or think of three good things that you did each day
Play a sport and have a coffee together after training
Talk to your friends about how you are coping with work and life demands
My Activities:

## Self-Care Plan (continued)

Spiritual self-care - Develop a sense of perspective beyond the day-to-day of life which can include religion, but it is not always about religion

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Some examples
Engage in reflective practices like meditation
<b>Go</b> on walks to connect with nature
<b>Go</b> to church/mosque/temple
<b>Do</b> yoga
My Activities:
Relationship self-care - Maintain healthy, supportive relationships
Some examples
Prioritise close relationships in your life eg. with partners, family and children
Attend the special events of your family and friends
My Activities: