Hospice focuses on providing comfort and improving quality of life for patients with serious illness and their families at the end of life. This includes providing relief from pain and other distressing symptoms, integrating psychological and spiritual aspects of care, and supporting patients and families. There is a shortage of hospice providers nationally.

A 68-year-old black male Vietnam Veteran with PMH of chronic obstructive pulmonary disease, hypertension, PTSD, and depression presented to the Veterans Affairs Medical Centers with chief complaints of shortness of breath and weakness. He had a right sided exudative pleural effusion and a new spiculated nodule in the left upper lobe of the lung for which he had a PET/CT and immunohistological analysis.

This case describes a pilot telehealth program in palliative cancer care: a case study. The work reported was supported by the authors’ institutions. The investigators retained full independence in the conduct of the study. The aim of this study was to explore clinician’s perspectives on and experiences of the utilization of a pilot telehealth module and its integration into a specialist palliative care program via focus groups and interviews of 10 providers in Australia. Some studies have explored telehealth models as a means of providing palliative care service in a complementary way rather than as a replacement for face-to-face assessments. Introducing this technology, however, challenged the team to critically explore aspects of current service provision. The introduction of technologies also has the potential to alter the dynamic of relationships between patients and their families and palliative care community clinicians. Implementation of a pilot telehealth programme in a specialist palliative care team needs to involve clinical staff in service redesign from the outset, and relate IT infrastructure and technical support.

This article reports on the ongoing implementation of a TeleHospice (TH) service in 16 rural counties in Kansas. It was an academic-community collaboration between University of Kansas and HospiceXchangeServices, Inc. TH 1.0 utilized mobile tablets and secure cloud-based videoconferencing for clinical consultation, family support and administration. Most studies thus far have been pilots, and have demonstrated the feasibility and acceptability of telehealth interventions in palliative care.

Innovative telehealth interventions can augment provision of support and palliative services to those who otherwise have minimal access.

Potential Role for Telehealth in Hospice

- Hospice focuses on providing comfort and improving quality of life for patients with serious illness and their families at the end of life. This includes providing relief from pain and other distressing symptoms, integrating psychological and spiritual aspects of care, and supporting patients and families.
- There is a shortage of hospice providers nationally.

Case

Dr. Yonggang Zheng

A Systematic Review of Telehealth in Palliative Care: A Qualitative Review

There is a shortage of hospice providers nationally.

A very brief review of literature has been summarized. Innovative telehealth interventions can augment provision of support and palliative services to those who otherwise have minimal access.