



ACADEMIC EXAMINATIONS
AT THE FACULTY OF MEDICINE OF THE UNIVERSITY OF LISBON
ADVANCED EDUCATION INSTITUTE

Master: Palliative Care (3rd Edition)

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SUMMARY

This work aims at understanding the causes of the inadequacy of referrals' information for palliative care units and at contributing to the elaboration of a more adequate model of referral. The perception that information contained in medical referrals is frequently insufficient and inadequate for palliative care units resulted from the daily experience of the author as clinical coordinator of such a unit, and triggered the motivation to develop the present study.

The study focused in the identification of the essential information of referral documents aimed at palliative care units; and in the analysis of referrals from 180 patients referred to hospitalization at the palliative care unit of *Casa de Saúde da Idanha* from 29th September 2007 to 13th July 2009, through *the Rede Nacional de Cuidados Continuados Integrados* computer lab.

The results of the study show that the majority of referrals were done by hospitals. The patients were predominantly male (57%) and mean age was 68,47 years. In addition, 96% of the patients had oncologic pathologies. The main reasons for referral were: need for daily activities support (22,49%) and pain control (19,53%). The referral fields which registered higher fill in percentage were: staging (77,2%), research and results (70%), and previous treatments (chronological history) (69%). The referral fields with lower fill in percentage were: information regarding patient's/relatives' knowledge about the diagnosis and prognosis of the disease (1,1%); allergies/adverse reactions (3%); and patient's psychological/psychiatric clinical history (8,9%). Caretaker exhaustion was registered solely in 1,36% of the cases.

This study confirms that the information contained in most referrals is incomplete and diagnosis-centered, rather than patient's needs/ family's needs-centered. The study also shows that the use of referral tools based in form letters and the definition of standard criteria for referrals fields may contribute to the improvement of overall referring quality.

Key words: Referral, Palliative care unit.