

Role: Attending physician of the pediatric intensive care unit

You are the attending physician in the PICU. Last night, a “frequent flyer” of yours was admitted for respiratory distress and acute respiratory distress syndrome. The patient is a 5-year-old boy who was diagnosed with a rare, progressive, genetic disease at birth. Consequently, he is severely developmentally delayed, tracheostomy and ventilator dependent, and fed via gastrostomy tube. As far as you can tell, each time the patient gets admitted to the PICU, his lungs get worse, and one of these admissions he will likely die from respiratory failure leading to cardiac arrest. Unfortunately, all your previous efforts to convince his parent to transition their son to comfort care measures have only fallen on deaf ears. Still, you know you need to address his code status with his parent on each admission. In case he ever does have an arrest, you definitely would not recommend CPR.

For this exercise, you are leading a care conference with the patient’s parent, his bedside nurse, a consultant expert in his genetic disease, and the social worker. You will begin by explaining to the parent how sick their child is and then hopefully get the parent to sign a Do Not Attempt Resuscitation order. You also recommend palliative care and comfort care measures.