We describe the development of a multidisciplinary course in palliative care that uses a nonfiction book on death and dying as a model for curriculum design and discussion-based learning in a school of pharmacy.

**Course Design**

- During the Spring 2014 and 2015 semesters, 23 third-year professional students enrolled in the weekly two-hour elective course.
- A team-teaching model was used incorporating clinical faculty as content experts from multiple pharmacy practice areas, including clinical care, pharmacology, oncology, hospice, internal medicine, pain management, palliative care, pediatrics, psychiatry. Non-pharmacist guest speakers including chaplains, hospice nurses, funeral directors, and patient advocates were also utilized.
- "How We Die: Reflections of Life’s Final Chapter," a nonfiction text written by Sherwin Nuland, MD, that examined death in the context of patient and now I can start rotations knowing that I have a well-rounded understanding of palliative care."
- "Lots of good case work, good prep for rotation. I'm more thorough now, and better understand how and why medications are used in palliative care and end-of-life patients."
- Course Schedule
  - **Week 1**: Book Chapter: Introduction to palliative care
  - **Week 2**: Book Chapter: Pain management in palliative care
  - **Week 3**: Book Chapter: Palliative care in cardiac disease/heart failure
  - **Week 4**: Book Chapter: Palliative care in geriatrics
  - **Week 5**: Book Chapter: Palliative care in Alzheimer’s disease/dementia
  - **Week 6**: Book Chapter: Palliative care in pediatrics
  - **Week 7**: Book Chapter: Palliative care in LGBTQIA+
  - **Week 8**: Book Chapter: Palliative care in hospice
  - **Week 9**: Book Chapter: Palliative care in end-of-life care
  - **Week 10**: Book Chapter: Spiritual issues and practices at the end of life

**Course Assessment**

- **Table 1: Summary of student course evaluations**
  - Question: I strongly disagree/poor; 5 = strongly agree/excellent
  - Weighted Mean
  - Grades were assigned fairly: 4.83
  - The instructional methods encouraged student learning: 4.49
  - Learned a great deal in this course: 4.67
  - Had a strong personal interest in the subject matter and wanted to take this course: 4.54
  - Adapting and adjusting to student attitudes and preferences: 4.90
  - Overall quality of the course: 4.49
  - Response rate (43%): 0.34

**Course Schedule**

<table>
<thead>
<tr>
<th>Week</th>
<th>Book Chapter</th>
<th>Topic</th>
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<tbody>
<tr>
<td>1</td>
<td>Introduction</td>
<td>Introduction to palliative care</td>
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<tr>
<td>2</td>
<td>Pain management</td>
<td>Pain management in palliative care</td>
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<td>3</td>
<td>1 &amp; 2</td>
<td>Palliative care in cardiac disease/heart failure</td>
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<td>Palliative care in geriatrics</td>
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<td>5</td>
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<td></td>
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**Learning Objectives**

- Compare and contrast palliative care with pharmaceutical care |
- Differentiate between palliative care, hospice, and end-of-life care |
- Evaluate factors affecting decisions to continue or discontinue medications in palliative care patients |
- Demonstrate an understanding of potential complications after discontinuation of maintenance or preventive medications |
- Develop skill in the presentation of specific palliative care needs of end-of-life patients |
- Demonstrate effective clinical decision-making skills in the care of palliative care and end-of-life patients |

**Course Assessment**

- **Table 2: Selected student comments**
  - If you were teaching this course, what would you do differently?
  - "Blog is a nice change of pace from the normal assignments we deal with."
  - "Weekly announcement to remind us of what's going on (book chapters, assignments) for next week."
  - "I loved that this class gave my brain a chance to think about something that has been kind of a black hole in my head."
  - "Really remarkable setting to our critical thinking skills and empathy toward patient's care."

**Conclusions**

- Development of a didactic course in palliative and end of life care using discussion-based learning was feasible, well-liked, and encouraged student learning. The course serves as a model for instruction of palliative and EOL care in other health professional degree programs or as an opportunity for interprofessional education.

**References**


**Conclusion**

- This course design provided students with the foundation on which palliative care clinical skills could be built and applied. The use of discussion-based instruction may be a beneficial active learning technique for developing a student's critical thinking skills and empathy toward patient's care and caregivers living with a serious or terminal illness.
- Enrollment increased by 25% (+2) from Spring 2014 to Spring 2015.
- Further evaluation is necessary to determine if course learning objectives were met using discussion-based learning and our multimodal method of assessment.
- Schools of pharmacy implementing didactic courses in palliative care and end-of-life care should develop strategies to ensure students are able to acquire advanced pharmacy practice experience in a related clinical setting to maximize their learning experience.

**Limitations**

- The SIRS survey response rate of 43% (12 out of 28 students) may introduce nonresponse bias.
- Course design required a small classroom environment.
- Weekly structure required an increased student-to-faculty ratio and coordination between the instructor and content expert) to facilitate book dialogue and provision of feedback during the group case discussions.

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**Disclosure**

Authors of this presentation have nothing to disclose concerning relationships with commercial interests that may have affected the content of this presentation.