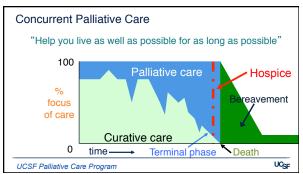


Good N	lews, Bad N	lews			
Life expectancy (years)	90 80 70 60 50	Death rate: 100%			
	40 30 20 10			~	
	。 30,000 BCE	15,000 BCE	1,000 BCE	2017	
UCSF Pall	liative Care Progra	am		UCSF	









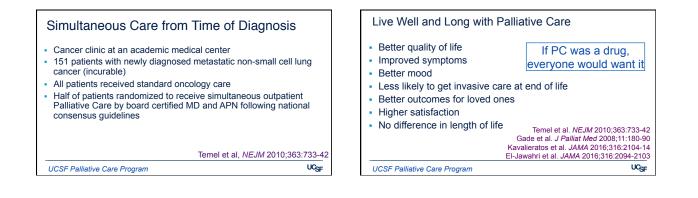
	-
My Story	
Interest in ethics	
 Involved no direct patient care 	
 "Find out what the patient prefers and do that" 	
 Medical school and residency in SF during early days of the AIDS crisis 	
 No cure for young men dying 	
- Care we provided didn't have a name; it was palliative care	
 Joined the faculty in 1996 	
- Caring for seriously ill and those near end of life very rewarding	
- PDIA Faculty Scholar Award	
- PCS 1999	

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Myths and Truths About Serious Illness

- You have to choose between quality and quantity of life
 A false choice
 - You can live well and long...with palliative care

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Design Challenge

Design an effective system to provide comprehensive and coordinated palliative care to all people with serious illness at UCSF Health

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Vision for Care for People with Serious Illness Every person with serious illness will receive integrated, high quality, person centered palliative care in any setting of care

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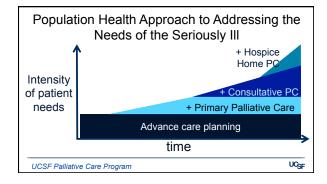
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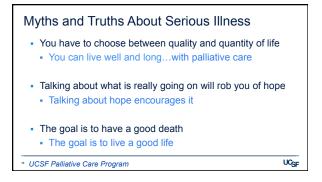


Routine, not random

- · Case finding
- Screening
- Colonoscopy screening
- Mammograms
- Flu shots
- Blood pressure checks
- Palliative care
- · Targeting intervention to need

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³ Life After the Diagnosis UCSF Palliative Care Program



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Creating a More Compassionate Healthcare System

- All healthcare institutions should provide Palliative Care Services in all settings
- Screen population for Palliative Care needs and meet them
- Educate all clinicians in basic palliative care
- Support training of more Palliative Care specialists

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For people with serious illness, their loved ones, their healthcare providers and everyone else who cares for them

www.lifeafterthediagnosis.com

