

Finally, presenters and attendees will explore financial, system, and staff limitations and generate strategies to implement interprofessional training experiences into their own programs. Interprofessional training provides unique benefits to patients, families, trainees, and clinical systems, and should be considered by programs nationwide.

Analog Care in a Digital World: Telemedicine in Outpatient Palliative Care (SA508)



Reggie Saldivar, MD, Memorial Sloan Kettering Cancer Center, New York, NY. Youngho Kim, MD, Memorial Sloan Kettering Cancer Center, New York, NY. Emma Allen, BSN RN, Memorial Sloan Kettering Cancer Center, New York, NY.

Objectives

- Compare between an ambulatory in-person palliative care visit and a telemedicine palliative care visit conducted between two clinical sites.
- Describe how clinicians can promote a therapeutic alliance within a telemedicine visit.
- Deepen knowledge of oncology patient's perception of telemedicine visits.

Interest in telemedicine continues to rise in conjunction with advancements in technology, improving reimbursement, and growing demands by patients and families. For patients with life limiting illnesses, additional clinician visits separated in time and location can represent a significant burden to quality of life. The use of telemedicine in outpatient palliative care holds the promise of improving access to palliative care while allowing patients to stay closer to home. Understanding patient's perceptions regarding satisfaction and acceptability are the first steps for meaningful expansion of telemedicine.

While prior work in telemedicine has focused on deploying this technology to patients in rural or remote areas, patients within an urban metropolitan area can experience difficulty in accessing palliative care specialists. Memorial Sloan Kettering Cancer Center has an expansive regional network in Westchester County, Long Island, and New Jersey. Patients who live in these regions are required to travel into Manhattan to receive ambulatory palliative care. In this concurrent session, we will share how we created an outpatient telemedicine palliative care program within our regional network that complements our current in-person ambulatory practice. Our physicians and nursing staff will share their perspectives on providing empathetic care within a digital space. We will describe the fundamental differences between telemedicine and in-person ambulatory visits from both a patient and clinician perspective. Utilizing data from patient surveys we will also examine whether these differences affect the patient's overall experience with

telemedicine. Understanding patient's acceptability and satisfaction with telemedicine visits was key in the development of our current program and we will share our most up to date patient data. Lastly, we will consider the feasibility factors that should be kept in mind when thinking about expansion of telemedicine within your own institution.

Specialty Palliative APRN Practice Through State-of-the-Art Graduate Education: Report of the HPNA Graduate Faculty Council (SA509)



Constance Dahlin, MSN ANP-BC ACHPN FPCN FAAN, Hospice and Palliative Nurses Association, Pittsburgh, PA. Mary Ersek, PhD RN FPCN, University of Pennsylvania School of Nursing, Philadelphia, PA. Dorothy Wholihan, DNP AGPCNP-BC ACHPN FPCN, NYU College of Nursing, New York, NY. Clareen Wiencek, PhD ACNP-BC, University of Virginia School of Nursing, Charlottesville, VA.

Objectives

- Define specialty palliative care practice for APRNs.
- Summarize the essential components and characteristics for master's programs for specialty APRN entry into practice.
- Discuss recommendations for graduate level APRN education.

As palliative care continues to move beyond hospital walls into office, clinics, homes, and long term care settings, more advanced practice registered nurses (APRNs) will be needed to assure access to high quality palliative care. Sound educational preparation of APRNs is critical to meet this workforce need. However, little is known about the content and teaching-learning approaches of existing Masters, DNP, and post-Masters certificate programs. Furthermore, there appears to be little standardization among these educational programs. This session will describe recommendations for preparing entry-level APRNs for specialty palliative care practice within graduate education.

Setting Trends in the Preoperative Care Setting: Advance Care Planning (SA510A)



Roma Patel, MD MPH, Indiana University, Indianapolis, IN. Shilpee Sinha, MD FACP, Indiana University Health Physicians, Indianapolis, IN. Rachel Gruber, MS, Regenstreif Institute, Indianapolis, IN. Barbara Nation, BSN, Indiana University Health, Indianapolis, IN. Kathleen Lane, MS, Indiana University School of Medicine, Indianapolis, IN. Na Bo, MSPH, Indiana University, Indianapolis, IN.

Objectives

- Examine the prevalence of Advance Directives in patients undergoing elective surgery.