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Communication between health care staff with cooperative patient and difficult family

Case Study

Cory is a two-old toddler with a rare liver disease who has been at CHOP for more than 30 days. He has spent most of his life in the hospital. He is an inpatient and day 30-post transplant. Cory is a happy boy. He frequently engages in imaginative play with stuffed animals and action figurines. He easily calms himself to cooperatively make the transition from play to the physical exam. One or both of his parents are always present. Because of their extensive knowledge of his medical condition his parents insist on active participation in medical care. His mother approaches the staff in a low key and unassuming way. His father is anxious and demanding.. He becomes anxious when Cory suffers from medical effects of the transplant and infection. When the medical team modifies the care plan, he become frantic, publicly states, “If Cory dies, I will kill someone” and then storms off the unit, returning when he is calm. In your role as the physician, which of the following would you likely perform?

Choose one of four responses (labelled as ‘not at all likely’, ‘somewhat likely’, ‘likely’, ‘very likely’).

- a. Use conversation to ease the patient’s and/or family’s intense emotions and pain
- b. Call a family meeting to review/address medical care and/or psychosocial issues
- c. Talk with a colleague about how to work with the patient/family’s emotional response
- d. Make a referral to a professional who is specifically trained to manage the psychosocial aspects of pediatric specialty care
- e. Avoid directly addressing the family’s emotional distress because it is a situation you are unlikely to change
- f. Attend to the patient’s medical care during times that limit interactions within the family (e.g., meal time, family is not present, or rounds when you’ll be called away)
- g. (RN version) Remove self from active care (e.g., calling in sick, requesting a “break,” or delegating to another team member (MD version) Other than your required duties as attending/fellow of record, remove yourself from active care because you no longer want to be involved with the family



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