

Breaking Bad News

Introduction

- Junior doctors often find breaking bad news to patients and/or relatives very daunting, however we are often far more anxious about these discussions than they are! Remember, usually our news will not be unexpected and often it is a relief to patients and families to have an honest discussion with a doctor about their illness. The following is a broad overview giving some practical advice for approaching these discussions.

Preparation

- **Prepare yourself** – are you feeling hungry, tired, stressed? Is there anything you could do to make yourself more comfortable? Do you have all the information you need: e.g. background, diagnosis, prognosis? Remember you don't need to have all the answers, just enough information to explain things clearly.
- **Prepare the patient/relatives** – if possible ask them to bring someone with them to the meeting. This can act as an initial warning shot before you even meet.
- **Gain consent** – If you are speaking to relatives, always seek consent from the patient first.
- **Prepare the environment** – A quiet room where possible and you should ideally be sitting where you can see everyone. Do you need anything else with you – notes/scans etc...?
- Ensure that you have told someone where you are and what you are doing and if possible get someone to hold your bleep to avoid being disturbed.

The Discussion

- Introduce yourself and find out who everyone is
- Start by asking them what they know and understand about what has happened up until now - remember building a rapport will help you.
- Introduce the concept of bad news gently and let things settle a little bit before moving on e.g. 'I have asked to meet you today as the results are back and sadly it isn't good news...'
- Use simple language to explain things, avoid jargon and try not to waffle. Be honest and straightforward, explaining what the news may mean for them or their loved one.
- If you are giving a prognosis, broad estimations can be very helpful to allow people to make plans. Use categories such as hours to days, days to short weeks, weeks to short months etc...
- Ask what the patient's wishes are/might have been – and if the patient is end of life remember to ask about religion and spirituality.
- Answer any questions honestly (it's OK to say you don't know!) and offer to speak to other family members later if they want you to. Explain that it can sometimes be difficult to take everything in at once and sometimes writing things down or taking home some written information can be helpful.

Follow up

- Document your conversation as soon as possible to ensure it is accurate including who was there and what questions you were asked.
- Ensure that you follow up on the discussion e.g. if you have promised to speak to other family members.
- Make sure you are OK - these discussions can be very difficult at times. If you are upset think about making a cup of tea and having a break.
- Consider a referral to the specialist palliative care team.