

Title: Decision-making about life support in the ICU: Whose Decision is it?
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Description: Because of the severity of illness, the ICU is a setting where clinicians must commonly make decisions about the value of starting or continuing life-sustaining treatments when these treatments seem unlikely to be successful. Historically, there has been marked variability in approaches to decision-making about life-sustaining treatments in the ICU: variability across different regions of the world, but also across different physicians in the same institution. More recently many physicians in many parts of the world have been moving closer together, as there has been increasing consensus on the value of some type of “shared decision-making” in the ICU that includes sharing responsibility between the patient’s family and the clinicians caring for the patient. Consequently, critical care clinicians need an understanding of the principles and practice of shared decision-making. Specific areas warrant attention: communication within the ICU team and with the family; the best role for the family in shared decision-making; and the role of medical futility in decision-making. A number of new interventions in these areas have improved quality of care in the ICU and can improve communication and collaboration among ICU clinicians. There is growing evidence that shared decision-making, done well, can improve outcomes for patients, families, and ICU clinicians.

Annotated Bibliography:

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Review article summarizing current knowledge in communication with families during ICU family conferences.