

Breaking Bad News in Endoscopy - Summary Clinical Guideline

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This clinical guideline applies to **all** Endoscopists who find a suspected cancer at Endoscopy at University Hospitals of Derby and Burton NHS Foundation Trust.

The standards for breaking bad news to patients are identified in the below summary, a full clinical guideline is also available.

Bad news is any news that drastically and negatively alters the patient's view of his or her future. This encompasses a wide variety of diagnoses and situations.

- Bad news should be broken by the endoscopist who has performed the patient's Endoscopy
- On a training list, the bad news should be broken by the senior clinician in the room, who may be accompanied by the trainee endoscopist
- The endoscopist should always have a trained Endoscopy Nurse or clinical nurse specialist in the room with them when breaking bad news.
- "Breaking bad news" should be undertaken in the quiet room
- if this is unavailable the seminar room or one of the private admissions rooms can be used
- It is **not** acceptable or appropriate for the patient to receive bad news inside the procedure rooms, nor in the recovery area.
- The patient should be given the option of having a relative or friend with them when the bad news is delivered. If a patient's relative/friend has been contacted to come into the department for the news to be delivered, the clinician should **always** wait for the relative/friend to arrive.
- Patients should always be given a contact number for the relevant Clinical Nurse Specialists to ensure that they are able to contact the correct person if/when necessary.
- The Endoscopist should email the relevant Clinical Nurse Specialists so that they are aware of the patient and can ensure they are booked onto MDT.