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Key Palliative Care Topic Areas for Hospital Medicine

This issue of the *Journal of Hospital Medicine* contains the inaugural article in a planned series addressing key palliative care topics relevant for the practice, teaching, and study of hospital medicine. As was noted by Diane Meier in her article "Palliative Care in Hospitals"¹ and in Steve Pantilat's accompanying editorial, "Palliative Care and Hospitalists: A Partnership for Hope,"² hospitalists are well positioned to increase access to palliative care for all hospitalized patients. Achieving this goal will require that hospitalists attain at least basic competence in the components of high-quality, comprehensive palliative care (assessment and treatment of pain and other symptom distress, communication about goals of care, and provision of practical and psychosocial support, care coordination, continuity, and bereavement services). Palliative care is becoming more prominent in medical school and residency curricula, palliative care fellowship opportunities are proliferating, a number of palliative care resources are available on the Internet, and motivated hospital-based providers may attain palliative care education via a variety of educational programs and faculty development courses (see Table 1 in the Meier article).¹ Some hospital medicine programs have specifically targeted faculty development in palliative care competencies.⁴

Recognizing the salience of palliative care for the practice of hospital medicine, the Society of Hospital Medicine (SHM) created the Palliative Care Task Force specifically to raise awareness of the importance of palliative care to hospital medicine and charged it with developing relevant palliative care educational materials. The Palliative Care Task Force has selected the *Journal of Hospital Medicine* as a means of disseminating palliative care content through a series of peer-reviewed articles on palliative care topics relevant to hospital medicine. The articles will address practical matters relevant to care at the bedside in addition to policy issues. The article in this issue, "Discussing Resuscitation Preferences: Challenges and Rewards,"³ addresses the common barriers to and provides practical advice for conducting these frequent, but often difficult, conversations. Planned topics, addressing some of the key domains of palliative care clinical practice, include: pain management, symptom control, communicating bad news, caring for the clinical care provider, and importance of a multidisciplinary team approach to end-of-life care. Each of these articles will specifically address the relevance and implications of these topics for the practice of hospital medicine.

The *Journal of Hospital Medicine* looks forward to reviewing these articles from the Palliative Care Task Force and invites additional submissions relevant to the practice, teaching, or study of palliative care in the hospital setting.

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