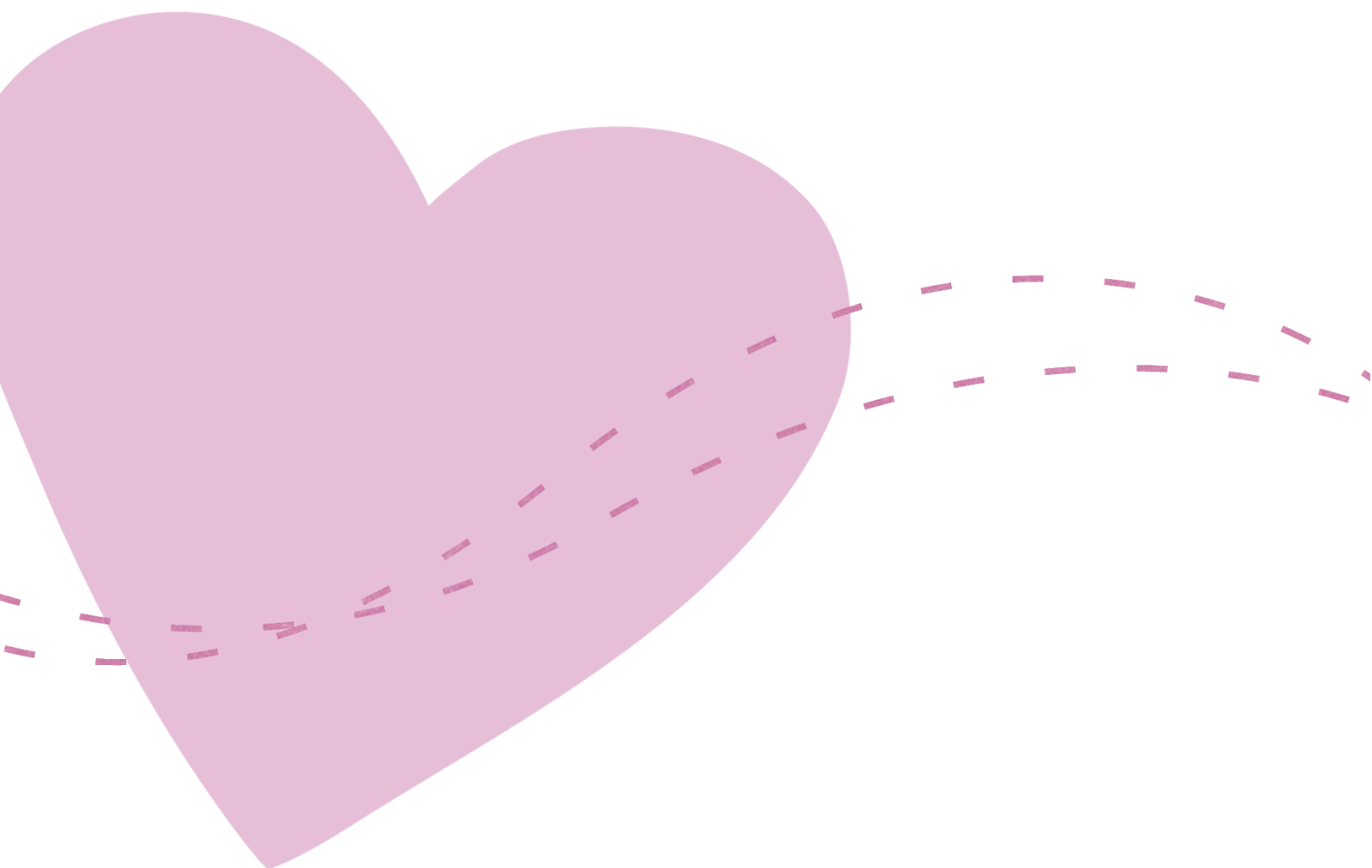




Palliative Care  
Victoria

# Glossary of Terms

English



The Palliative Care Victoria Glossary of Terms has been developed to help patients, carers, family members and staff to better understand and communicate terms and acronyms often used in palliative care.

It is also designed to provide language professionals with access to accurate and culturally and linguistically appropriate palliative care terminology to ensure consistency both within and across languages.

The glossary is **free to download** and has also been published in: Arabic, Chinese Simplified, Chinese Traditional, Croatian, English, French, German, Greek, Hindi, Italian, Macedonian, Polish, Serbian, Spanish, Tagalog, Turkish and Vietnamese. Each version has been professionally translated and tested with community representatives for accuracy and readability.

## Palliative Care Victoria

Palliative Care Victoria (PCV) is the peak body for palliative care and end of life services in Victoria. PCV is committed to ensuring that all people with a life limiting illness and their families are supported to live, die and grieve well.

Established in 1981, it is an incorporated association and charity supported by the Victorian Government, organisational and individual members, other groups and funders. A founding and current member of Palliative Care Australia, it also contributes to national policies and initiatives in collaboration with the state and territory palliative care peak bodies.

## Acknowledgement of Country

PCV acknowledges the Traditional Owners and Custodians of the land on which it works across Victoria recognising their continuing connection to lands, waters and communities and paying respect to their Elders past, present and emerging.

## Disclaimer

The information contained in this publication is intended as a reference tool only and not to be used to diagnose, treat, cure or prevent any medical conditions or palliative care needs. PCV (including its board members, employees, volunteers, contracted agents and partner organisations) is not liable to any person in contract, tort (including negligence or breach of statutory duty) or otherwise for any direct or indirect loss, damage, cost or expense arising out of or in connection with that person relying on or using any information or advice provided in this publication or incorporated into it by reference.

## Further information

For further information about any of the terms or acronyms listed in this publication please contact PCV or visit the website.

Phone: 03 9662 9644

Email: [info@pallcarevic.asn.au](mailto:info@pallcarevic.asn.au)

Website: [www.pallcarevic.asn.au](http://www.pallcarevic.asn.au)

PCV can be contacted 9am to 5pm Monday to Friday, excluding public holidays.

## **actively dying**

The last hours and days of a person's life.

---

## **acute pain**

Pain which is of short duration and normally resolves when the body heals itself, such as after injuries or operations.

---

## **advance care planning**

The process of planning ahead for future health and personal care should a person be unable to communicate or make medical decisions for themselves.

---

## **advance care directive**

A legally binding document that sets out a person's future healthcare treatment preferences. These preferences must be followed if the person is unable to communicate or make medical decisions for themselves. This is also sometimes referred to as an advance care plan.

---

## **advocacy/advocate**

The process of supporting and enabling people to express their opinions and concerns, to access information and services, to defend and promote their rights and responsibilities, and to explore choices and options. A person who supports others in this way is called an advocate.

---

## **allied health professional**

Health professionals with specialised expertise in preventing diagnosing and treating a range of conditions and illnesses.

---

## **bereavement**

A period of mourning after a loss, especially after the death of a loved one. Bereavement is recognised as a final stage in the palliative care continuum.

---

## **capacity**

Being capable of making one's own treatment decisions.

---

## **carer**

A person who looks after someone who needs help with day-to-day living. The term is most often used to describe unpaid carers but sometimes used to describe those who provide care as professionals.

---

## **care coordination**

When health workers and/or medical professionals work together in a team to provide health care.

---

## **care navigator**

A trained professional who assists someone to find the right care and support services to meet their needs.

---

## **chronic condition/disease**

An ongoing long-term illness characterized by persistent and recurring health consequences lasting for three months or more.

---

## **chronic pain**

Any pain lasting more than 12 weeks.

---

## **consent to treatment**

Giving permission before receiving any type of medical treatment, test or examination. Consent is not required for palliative care, but clinicians should take into consideration the person's preferences and values when providing palliative care.

---

## **comfort care**

Commonly used to mean end of life care.

---

## **community palliative care**

Is palliative care that is provided in your home or residential aged care.

---

## **comorbidity**

When people have more than one health condition at the same time. Each health condition is called a comorbidity.

---

## **CPR - cardiopulmonary resuscitation**

An emergency procedure performed when a person's heart or breathing stops. It can involve a combination of physical techniques including chest compressions, mouth-to-mouth breaths, electric shock to the chest (defibrillation) and insertion of a breathing tube into the lungs.

---

## **curative care**

Medical treatments or interventions expected to remove a health problem completely and allow the person to recover to their previous level of health.

---

## **cultural needs**

Values, practices, beliefs and protocols that are important to an individual.

---

## **care with dignity**

Supports the self-respect of a person, recognising their capacities and ambitions and does nothing to undermine it.

---

## **delirium**

A sudden altered conscious state experienced by people when they are unwell. When a person develops delirium, they may become confused, lose attention quickly or become agitated and irritable. They may also become unusually quiet and not interact as usual.

---

## **dementia**

A term used for several progressive disorders of the brain that cause confusion or memory loss as well as difficulty with language, problem solving and performing day to day tasks.

---

## **emotional support**

Showing care and compassion for another person.

---

## **end of life**

The period of time when someone is likely to die in the next 12 months.

---

## **end of life care**

Care needed for people who are likely to die in the next 12 months due to progressive, advanced or incurable illness or frailty.

---

## **frailty**

A physical state that can include unintentional weight loss, muscle loss/weakness, feeling fatigued, low levels of physical activity and reduced walking speed.

---

## **goals of care**

What a person wants to achieve during an episode of care, within the context of their clinical situation and their treating medical team.

---

## **grief**

The emotional reactions and processes experienced from the illness or death of a loved one.

---

## health care

Any type of services provided by health professionals that impact on health.

---

## holistic care

Care that involves considering all of a person's needs taking into account their physical, emotional, social and spiritual wellbeing.

---

## home care

Health care or supportive care services provided in a home setting.

---

## hospice

A program or place that cares for people who are nearing death.

---

## hospice care/specialist inpatient unit

A type of service delivering palliative care and can include both free-standing hospices and/or palliative care wards within a hospital.

---

## life limiting condition

A condition for which there is no reasonable hope of cure and from which a person will inevitably decline and is expected to die.

---

## Medical Treatment Decision Maker

A person formally appointed or identified from a legal hierarchy of decision-makers, to make medical decisions on behalf of someone in capacity to make decisions for themselves. Appointed Medical Treatment Decision Makers were formerly known as a Medical Power of Attorney, and these Medical Powers of Attorney, completed prior to 12th March 2018 are still valid. The term, Medical Treatment Decision Maker was introduced as part of Victoria's Medical Treatment Planning and Decisions Act 2016. A person must be deemed to have capacity at the time of appointing a Medical Treatment Decision Maker.

---

## **medical treatment**

The medical management and care of a patient to treat a disease or disorder.

---

## **medication**

Any medicine or preparation used to treat, manage or cure illness.

---

## **morbidity**

Suffering from a disease or medical condition.

---

## **multidisciplinary team**

A group of health, allied health and other professionals from different disciplines who collaborate to meet the care needs of a patient.

---

## **NFR - not for resuscitation**

A medical order to withhold cardiopulmonary resuscitation (CPR).

---

## **palliation**

Treatment that helps a patient feel more comfortable and improves quality of life but does not cure the disease.

---

## **palliative approach**

Recognises that death is inevitable and focuses on the care rather than cure of a person with a life-limiting illness.

---

## **palliative care continuum**

Health care that can span from the point of diagnosis with a serious illness to death.

---

## **palliative care patient**

A person receiving a palliative care service.

---

## **palliative care services**

Community, hospice, hospital or residential aged care programs with health professionals who have advanced training in palliative care. They provide holistic care to patients with complex palliative care needs, provide advice and educate non-specialist health care professionals who are providing palliative care.

---

## **palliative care specialist/doctor**

A doctor who has specialised in the field of palliative medicine. Palliative care specialists can also be nurse practitioners.

---

## **palliative care**

Care that helps people live their life as fully and as comfortably as possible when living with a life limiting or terminal illness by treating distressing or painful symptoms of the condition and supporting their emotion, psychological, cultural and spiritual wellbeing.

---

## **palliative care team**

Palliative care may be provided by a wide range of health, allied health and other professionals.

---

## **person centred approach**

An approach to health care that treats each person respectfully as an individual.

---

## **primary carer**

A person who undertakes the main role in the coordination and delivery of care and support for another person.

---

## **quality of life**

A term used to capture a person's subjective physical, psychological, social, cultural and spiritual wellbeing.

---

## **pain relief**

The act of treatment or therapy for reducing, managing or eliminating pain.

---

## **referral**

The act of referring someone or something for consultation, review, or further action.

---

## **refusal of treatment**

A person's legal right to decline the use of medical treatment. They should be given the opportunity to understand what that treatment involves, the consequences of not having it and alternatives that may be available. Whilst a person with capacity may refuse palliative care, their Medical Treatment Decision Maker is not able to refuse it on behalf of a person lacking medical decision-making capacity. The person's own preferences and values should still be taken in consideration.

---

## **respite care**

When someone else takes care of the person you care for, so that you can have a break.

---

## **specialised palliative care services**

Community, hospice or hospital-based programs with health professionals who have advanced training in palliative care. They provide holistic care to patients with complex palliative care needs, provide advice and educate non-specialist health care professionals who are providing palliative care.

---

## **spiritual care**

An aspect of healthcare that supports the inner person (spirit/soul) to help deal with health care challenges.

---

## **symptoms**

Physical or mental changes that occur as part of a disease process.

---

## **substitute decision maker**

A person who is legally recognised as an appointed or non-appointed decision-maker to make health care or medical treatment decisions for a person who has lost decision-making capacity. If the decision is about medical treatment, in Victoria this will be the person's Medical Treatment Decision Maker.

---

## **supportive care**

Where the focus of treatment is what is important to the patient.

---

## **supported decision making**

The provision of support to enable a person to be able to exercise their legal decision-making rights. The additional support enables the person with decision-making capacity to make their own decisions - the person providing support does not make the decision on behalf of the person needing support.

---

## **terminal condition**

When a diagnosed health condition cannot be cured and will eventually cause death.

---

## **terminal illness**

An illness that cannot be cured and will eventually cause death.

---

**terminal phase**

The final hours or days before a person dies.

---

**therapy/therapeutic**

Treatment provided to a patient with the goal of curing, delaying progress of an illness or provision of symptom and pain relief.

---

**treatment**

Any medical, surgical or other health care intervention.

---

**wellbeing**

A complex combination of a person's physical, mental, emotional and social health factors.

---

## Palliative Care Victoria Glossary of Terms English

Palliative Care Victoria encourages the free use and distribution of this resource. It may not be reproduced for sale without permission.

Palliative Care Victoria Suite 3C, Level 2  
182 Victoria Parade  
East Melbourne Victoria 3002

Phone: 03 9662 9644  
Email: [info@pallcarevic.asn.au](mailto:info@pallcarevic.asn.au)  
Website: [www.pallcarevic.asn.au](http://www.pallcarevic.asn.au)

