TRANSCRIPT OF MEDIA-Pediatric oncologist promotes 'regret prevention' care approach

Dr. Justin Baker, pediatric oncologist and chief of the Division of Quality of Life and Pediatric Palliative Care at Stanford Medicine. Dr. Baker has also advised OSF HealthCare Children's Hospital of Illinois

Dr. Baker describes as a holistic approach that involves every member of the care team, from social workers and psychologists to radiation and medical oncologists and nurses – everyone.

"When we think about quality of life, when we think about making every single day the very best day possible, there are some very practical techniques. One is making sure that we're listening and that we're listening with an open heart, because the second thing is to apply compassion. Compassion literally means to suffer with … to suffer with our patients and families, to help them carry this very heavy burden." (:26)

Holistic palliative care fosters honest communication to discuss goals for the child and family to drive treatment decisions.

"All of a sudden, people can take a breath, talk about the things that really matter, and all that energy that was being used to pretend that things are OK, it is now being channeled into doing things that make everything better. We can then focus on how we make today the best day possible." (:22)

Dr. Baker says hope is a coping mechanism that gives a sense of purpose and adds to quality of life.

"When we think about promoting hope, what we try to do is hope for the best and plan for absolutely everything. And one of the most important things we do is we provide anticipatory guidance." (:12)

Medical providers supporting a sick child and their family should be in the 'regret prevention' business.

"I think preventing regret is one of the most important things we can do and the best way to do it is to walk alongside that family, helping them make these very difficult decisions and that we carry some of that weight." (:13)

Dr. Baker preaches about the need for pausing and reflecting to consider whether medical interventions ensure that treatment aligns with the patient and family's wishes.

"Usually, we just do things, and we do things *to* the patient rather than thinking 'Are we doing this *for* the patient? Are we doing this *for* the family?' And so, too often we *do* because we *can* without fully contemplating whether we should. It's a way to be a little bit provocative to say, 'Did you really pause and think about this?'" (:20)