

# Use of SPIKES-NURSE Protocol to Teach Breaking Bad News



University Hospitals

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## Background:

Breaking bad news (BBN) is a vital skill for physicians across many specialties. Many physicians feel uncomfortable with their ability to effectively deliver bad news, which may be attributed to the lack of curriculum on this subject. The 'SPIKES' protocol is a validated tool which provides a step-wise framework for this complex communication task<sup>1</sup>. We have modified this protocol to include the 'NURSE' acronym which focuses on empathy<sup>2</sup>.

## Objective

This study aimed to determine if a new 3-hour structured teaching session with didactics and role playing, centered on the use of SPIKES-NURSE would result in improved comfort and ability in giving bad news for medical students.

### SPIKES-NURSE MNEMONIC

<b>S:</b> Set-up	<b>N:</b> Name
<b>P:</b> Perception	<b>U:</b> Understand
<b>I:</b> Invitation	<b>R:</b> Respect
<b>K:</b> Knowledge-giving	<b>S:</b> Support
<b>E:</b> Emotions/Empathy	<b>E:</b> Explore
<b>S:</b> Strategy/Summary	

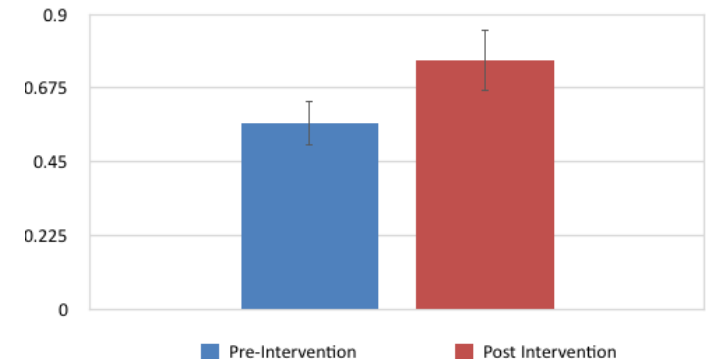
## Study Design and Methods

- Twenty-one 4th year medical students were assessed on their skills in BBN using a numeric/qualitative scale assessing their communication skills and comfort levels as well as a self-survey of individual comfort levels
- The students participated in a 3 hour structured teaching session in which they were taught the SPIKES-NURSE mnemonic as a framework for BBN.
- Students completed a pre-test and post-test using standardized patients in OSCE session
- The scores on their OSCEs as well as their self-surveys were averaged and compared from pre-intervention to post-intervention.

## Results

- Survey question responses ranged from 1 "strongly disagree" to 5 "strongly agree"
- Q1 "In general, do you feel comfortable discussing with patient/relatives issues concerning cancer diagnosis, prognosis, and life expectancy?" Pre=2.52, Post=3.62, p=0.0001
- Q2 "Overall, I felt comfortable delivering bad news in this case today" Pre=2.76, Post=3.76, p=0.00008
- Q3 "Overall, I feel like I understand the key elements required in the art of breaking bad news" Pre=2.81, Post=4.28, p=0.000001
- Q4 "Overall, I felt that this experience was reflective of real life situations" Pre=4.1 Post=4.4
- Prior to intervention, only 57% of students reported formal training on BBN
- 95% of students felt that learning the SPIKES-NURSE tool helped in BBN
- SPIKES-NURSE performance scoring (as graded by standardized patients and observing physicians; 1= best possible score): Pre=0.57 Post=0.76, p=0.002

### Average SPIKES-NURSE Score



## Conclusion:

A 3-hour teaching session based on the SPIKES-NURSE protocol was associated with significant improvement in medical student performance and comfort in delivering bad news. The results of this study suggest that including more standardized curriculum to address BBN can significantly increase comfort level with performing this essential skill. The OSCE environment as a simulation for real-life situations was viewed as realistic and represents an appropriate "safe place" for students to practice these skills. In our study we focused on adding "NURSE" to "SPIKES" to increase the emphasis on empathy. Further studies comparing the two protocols would yield interesting results.

## References:

- <sup>1</sup>Baile WF, R Buckman, R Lenzi, G GLober, EA Beale, AP Kudelka. August 2000. SPIKES - A Six-Step Protocol for Delivering Bad News: Application to the Patient with Cancer. Houston, TX. The Oncologist 2000 vol. 5 no.4 302-311
- <sup>2</sup>Vital Talk: Medical Oncology Communication Skills Training. 2002. <http://vitaltalk.org/clinicians/track-respond-emotion>

### Student Comfort Survey Results

