

Table 1
Classification of facilitators and barriers in bad news communication

Preparation:

- Familiarize with the patients' medical history
- Arrange for privacy and avoid interruptions
- Ensure having enough time available
- Rehearse mentally before breaking the bad news
- Jot down important data about what he/she should or should not disclose to his/her patient
- Identify own emotions before disclosing the bad news
- Do not assume that the bad news have the same meaning for him/her as for the patient

Exploration:

- Know the patient's caregivers and/or relatives and their relationship
- Assess the patient's level of knowledge
- Identify the patient's emotions before receiving the bad news
- Acknowledge the patient's cultural and socio-economic characteristics

Communication:

- Use straightforward language and avoid medical jargon
- Give information in small pieces
- Always check the patient's understanding
- Use diagrams and drawings
- Strive to maintain a balance among honesty, compassion and hope
- Allow the patient to interrupt
- Tolerate and allow time for silence and weeping
- Encourage the patient to express his/her emotions
- Identify the patient's emotional reactions that require immediate attention
- Ensure emotional support for the patient
- Do not avoid using words such as death, cancer, terminal, chronic, degenerative disease, among others
- Recognize own feelings when communicating bad news
- Devise a joint action plan with the patient

Feelings (low scores in the following emotional experiences):

- Anxiety
- Fear
- Sadness
- Guilt
- Helplessness
- Frustration

Training:

- Know how to effectively disclose bad news to his/her patients
- Have formal training in communication skills to deliver bad news
- Have non-empirical professional training in emotional crises intervention
- Willing to be trained in communication skills

Organizational characteristics:

- Have enough time for his/her clinical practice
- The institution's space characteristics (privacy, comfort) are adequate
- There is interdisciplinary support available in the institution where he/she works
- Frequently use that support
- The institution where he/she works offers support that allows doctors to deal with and handle emotions triggered from the bad news communication process

Note: High scores of the listed factors are deemed as facilitators in communicating bad news. Those that are not followed or available (low score) are seen as a barriers. High scores of listed emotions are regarded as barriers