

Goals of care and COVID-19: A GOOD framework for dealing with uncertainty – CORRIGENDUM

Corrigendum

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COVID-19; decision-making; end-of-life care; goals of care; uncertainty; corrigendum

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In the original publication of this editorial (Petriceks and Schwartz, 2020), a number of errors appeared. The name of co-author Andrea Wershof Schwartz was published with an erroneous initial, and her affiliation listing omitted her affiliation with Harvard Medical School.

The published version of [Table 1](#) also omitted some necessary citations for the sources of the potential resources listed in the rightmost column. The full, correct version of [Table 1](#) and its notes appears below:

Table 1. GOOD framework^a

	Clinician task	Potential uncertainties	Potential resources
Goals	Determine the goals and values of the patient	Patient may not know their own goals, or may have goals which contradict one another	<ul style="list-style-type: none"> – Patient Priorities Care^b – Stanford Letter Project^c
Options	Determine and describe options available to patient – including details and probabilities – given their goals	Clinicians may be uncertain about clinical options; patient may have uncertainties or misconceptions but not know how to clarify	<ul style="list-style-type: none"> – VHA LSTDI^d – Video Decision Tools – CAPC^e
Opinions	Elicit patient preferences regarding options available; communicate clinician perspective on most conducive option; arrive at shared decision	Clinicians may struggle to provide clinical recommendation due to prognostic uncertainty	<ul style="list-style-type: none"> – Clinical Frailty Scale – ePrognosis^f – CAPC^e
Documentation	Document outcome of decision-making process; highlight reasoning behind any decisions; make note of all participants	Clinicians often write brief notes (e.g., “DNR”), which may not reflect the nuance and situational dependency of patient values	<ul style="list-style-type: none"> – POLST^g – Prepare for Your Care^h – VHA LSTDI^d

^aAdapted from the Stanford University School of Medicine End-of-Life Curriculum for Medical Teachers.

^bPatient Priorities Care, 2019.

^cStanford University, 2020.

^dVeterans Health Affairs Life-Sustaining Treatments Decisions Initiative (Foglia et al., 2019).

^eCenter to Advance Palliative Care (2020).

^fUCSF, 2020.

^gPortable Orders for Life-Sustaining Treatment.

^hSudore et al., 2017.

Additionally, the authors of the editorial would like to provide the ORCID for Dr. Schwartz, which was not included in the original publication.

The authors apologize for these errors. The editorial has been updated.

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