

GUIDELINES FOR DETERMINING HOSPICE APPROPRIATENESS

Non-cancer patients with prognosis of (6) months or less

<p><u>General Decline (In the setting of other comorbidities)</u></p> <ul style="list-style-type: none"> • Increased dependence in at least (3) ADL's, bathing, eating, dressing, walking, toileting • Multiple co-morbidities • Unintentional weight loss • Increased need for medical care: ER visits, hospitalization, MD visits, transfers appropriateness 	<p><u>End Stage Renal Disease</u></p> <p>A prognosis of less than six months is indicated by the presence of both of these characteristics in a patient not seeking a transplant or ongoing dialysis</p> <ul style="list-style-type: none"> • Creatinine clearance of less than 10mL/Min (15 mL/min in Diabetes) • Serum creatinine of greater than 8mg/dL (6 mg/dL in Diabetics)
<p><u>CVA</u></p> <p>Six month prognosis is indicated in acute stroke by the presence of any of these findings:</p> <ul style="list-style-type: none"> • Coma or persistent vegetative state beyond 3 days duration after stroke • Dysphasia severe enough to prevent adequate nutrition where artificial nutrition is inappropriate • Severe obtundation with severe myoclonus, persistent beyond 3 days, duration after stroke 	<p><u>End Stage Heart Disease</u></p> <ul style="list-style-type: none"> • Dyspnea or angina at rest, worsening in spite of maximal medical management • Resistant arrhythmias, cardiac arrest history, active HIV, angina at rest, history of MI, known ejection fraction <20% support this prognosis but need not be present
<p><u>End Stage Lung Disease</u></p> <p>Presence of at least one characteristic of each category</p> <ul style="list-style-type: none"> • Disabling dyspneas, refractor to treatment <ul style="list-style-type: none"> * Dyspnea at rest * Dyspneas limiting a patient to a bed to chair existence • Blood gas values consistent with end-stage disease <ul style="list-style-type: none"> * PO₂<55mm HG on supplemental oxygen * Oxygen saturation <88% on supplemental O₂ * PCO₂> 50 mm HG • Presence of right heart failure <ul style="list-style-type: none"> * Physical findings of right sided failure * Echocardiographic documentation * Cor Pulmonale on EKG 	<p><u>Liver Disease</u></p> <ul style="list-style-type: none"> • The presence of both prothrombin time >5 seconds over control and serum albumin 2.5 gm/dL • The presence of at least one of the following: <ul style="list-style-type: none"> * Refractory ascites * Spontaneous bacterial peritonitis * Hepatorenal syndrome * Refractory hepatic encephalopathy * Recurrent variceal bleeding despite therapy • May be on the waiting list for transplant: will be discharged from hospice if donor is found
<p><u>Dementia Due to Alzheimer's Disease & Related Disorders:</u></p> <p>Presence of at least one characteristic:</p> <ul style="list-style-type: none"> • Senile degeneration of the brain • Inability to walk without assistance • Inability to dress without assistance • Inability to bath without assistance • Occasional or more frequent incontinence of urine and stool • Inability to speak or communicate meaningfully, uses stereotypical phrases only or is limited to 6 or fewer intelligible words <p>One of the following or some other significant condition w/ in a year:</p> <ul style="list-style-type: none"> • Infection including septicemia, pneumonia or UTI • Decubitus ulcers stage 3-4 • Malnutrition with 10 % weight loss during the past 6 months or serum albumin <2.5 gm/dL <p style="text-align: center; color: #008080;">To Make Hospice Referrals, Request Informative Visits, or Confirm Eligibility</p> <p style="text-align: center;"><u>Call Intake:</u> P: 866-591-8843 <u>Fax Intake:</u> F: 207-400-8894</p>	<p><u>Amyotrophic Lateral Sclerosis</u></p> <p>Presence of at least one characteristic from each category:</p> <ul style="list-style-type: none"> • Progression of illness within the past 12 months preceding initial hospice certification shown by: <ul style="list-style-type: none"> * Change from independence to dependence in most ADLs * Change from independent ambulation to wheelchair or bed bound * Change from normal to pureed diet • Disease exacerbated by any one of the following findings within 12 months: <ul style="list-style-type: none"> * Pulmonary vital capacity <30% expected * Dyspnea at rest * Requires oxygen at rest * Weight loss * Evidence of hypovolemia * Pyelonephritis * Sepsis * Fever recurrent after antibiotics * Multiple stage 3-4 decubitus ulcers <p>Effects of artificial feeding or assisted ventilation may compromise prognostic indicators, but this should be considered in the clinical context</p>