

When to Make A Hospice Referral

Determining life expectancy during the course of a terminal illness is difficult. These are general guidelines that will help identify patients who may be eligible for hospice services. **Some patients may not meet these guidelines yet still be appropriate.** Our goal is to help patients live the rest of their lives as they wish, and to be comfortable physically, emotionally and spiritually.

Non-disease specific guidelines:

- Weight Loss (>10% in past 6 mos.)
- Dependent on most ADL's
- Frequent hospitalizations / ER visits
- Recurrent infections
- Lack of response to treatment
- *PPS ≤ 50%

Alzheimer's / Other Dementia

1. Fast Scale* of Stage #7 (any level, a-f) – **Alzheimer's only**
 - a) Speech limited to ≤ 5 words/day
 - b) Incontinence of bowel/bladder
2. Co-morbid or Secondary Conditions, such as:
 - a) Symptomatic CHF or COPD
 - b) Aspiration pneumonia
 - c) Infection - recurrent
 - d) Delirium
 - e) Stage 3 or 4 pressure ulcers
 - f) 10% weight loss or serum albumin < 2.5gm/dL
 - g) Fever - recurrent

Heart Disease – (Should have 1 or 2 AND 3)

1. Poor response to optimal medical management
- OR**
2. Angina pectoris at rest, resistant to standard nitrate therapy
- AND**
3. New York Heart Association* Class IV symptoms of CHF, i.e., symptoms at rest
- Other supporting documentation:
- Hx of cardiac arrest or resuscitation
 - Ejection fraction < 20% (not required)
 - Treatment resistant symptomatic dysrhythmias
 - Unexplained syncope

Pulmonary Disease-COPD

1. Severe chronic lung disease (a & b should be present)
 - a) Disabling dyspnea at rest or with minimal exertion despite bronchodilators
 - b) Increasing ER visits or repeated hospitalizations for pulmonary diagnosis
 - c) bed to chair existence, fatigue
2. Hypoxemia at rest on room air, O2 Sat ≤ 88% or pO2 < 50 mmHG or hypercapnia evidenced by pCO2 ≥ 50 mm HG

HIV – (Should have 1, 2 & 3)

1. CD4 count < 25/mcL OR viral load > 100,000 AND one of the following complications:

a) CNS lymphoma	e) Systemic lymphoma
b) Wasting syndrome	f) Visceral Kaposi's sarcoma
c) Mycobacterium avium complex	g) Renal Failure
d) Progressive multifocal leukoencephalopathy	h) Cryptosporidium/toxoplasmosis
2. PPS ≤ 50%
3. Off antiretrovirals

Liver Disease – (Should have 1, 2 & 3)

1. INR > 1.5
2. Serum Albumin < 2.5gm/dL
3. End-stage liver disease is present and the patient has at least one of the following:
 - a) Ascites, refractory to tx or pt non-compliant
 - b) Spontaneous bacterial peritonitis
 - c) Hepatorenal syndrome
 - d) Hepatic encephalopathy
 - e) Recurrent variceal bleeding

Neurological – (The following should be present)

1. Rapid disease progression: from independent to w/c or bedbound, normal to barely intelligible speech
2. Nutritional impairment (weight loss, oral intake insufficient to sustain life, absence of artificial feeding, dysphagia)
3. Life-threatening complications:
 - Aspiration pneumonia
 - Sepsis
 - Stage 3 or 4 pressure ulcers

ALS

1. Critically impaired breathing
2. Critical nutritional impairment
3. Life threatening complications

Cancer

- Disease progression despite treatment
- Increased tumor burden
- PPS ≤ 60%
- Metastasis
- Unintentional Weight Loss ≥ 10% in 6 mos.

Renal Disease

1. No plans for dialysis or transplant
2. Discontinuing dialysis
3. Estimated GFR (glomerular filtration rate) < 15mL/min
4. Signs/Symptoms of renal failure:
 - a) Uremia
 - b) Intractable volume overload
 - c) Intractable hyperkalemia
 - d) Oliguria
 - e) Uremic pericarditis

Functional Assessment Staging (FAST)

MUST BE FOLLOWED SEQUENTIALLY. DO NOT SKIP STAGES.
Applicable in Alzheimer's Disease only.

Stage 1 – Normal adult

No functional decline

Stage 2 – Normal older adult

Personal awareness of some functional decline

Stage 3 – Early Alzheimer's disease

Noticeable deficits in demanding job situations.

Stage 4 – Mild Alzheimer's

Requires assistance in complicated tasks such as handling finances, planning parties, etc.

Stage 5 – Moderate Alzheimer's

Requires assistance in choosing proper attire.

Stage 6 – Moderately severe Alzheimer's

Requires assistance dressing, bathing, and toileting. Experiences urinary and fecal incontinence.

Stage 7 – Severe Alzheimer's

Speech ability declines to about a half-dozen intelligible words. Progressive loss of abilities to walk, sit up, smile, and hold head up, (Reisberg, et al, 1988)

7A - In a course of an average day or in intensive interview, no consistently meaningful verbal communication, only stereotypical phrases, or ability to speak is limited to 6 or fewer intelligible words.

7B - In a course of an average day or an intensive interview, ability to speak is limited to the use of a single intelligible word which the patient may repeat over and over.

7C - Ability to ambulate without personal assistance is lost.

7D - Cannot sit up without assistance (patient will fall over if there are no lateral arm rests on the chair).

7E - Loss of ability to smile.

7F - Loss of ability to hold head up independently.

New York Heart Association (NYHA) functional class

The New York Heart Association (NYHA) functional class helps to classify congestive heart failure patients based on their symptoms.

Class I – No symptoms of heart failure

Class II – Symptoms of heart failure with moderate exertion such as ambulating 2 blocks or 2 flights of stairs

Class III – Symptoms of heart failure with minimal exertion such as ambulating 1 block or 1 flight of stairs, but no symptoms at rest

Class IV – Symptoms of heart failure at rest

Palliative Performance Scale (v.2)

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%	Ambulation	Activity & Evidence of Disease	Self-Care	Intake	Conscious Level
100	Full	Normal Activity & Work No Evidence of Disease	Full	Normal	Full
90	Full	Normal Activity & Work Some Evidence of Disease	Full	Normal	Full
80	Full	Normal Activity <i>with</i> Effort Some Evidence of Disease	Full	Normal or Reduced	Full
70	Reduced	Unable Normal Job/Work Significant Disease	Full	Normal or Reduced	Full
60	Reduced	Unable Hobby/House Work Significant Disease	Occasional Assistance Necessary	Normal or Reduced	Full or Confusion
50	Mainly Sit/Lie	Unable to Do Any Work Extensive Disease	Considerable Assistance Required	Normal or Reduced	Full or Confusion
40	Mainly In Bed	Unable to Do Most Activity Extensive Disease	Mainly Assistance	Normal or Reduced	Full or Drowsy +/- Confusion
30	Totally Bed Bound	Unable to Do Any Activity Extensive Disease	Total Care	Normal or Reduced	Full or Drowsy +/- Confusion
20	Totally Bed Bound	Unable to Do Any Activity Extensive Disease	Total Care	Minimal To Sips	Full or Drowsy +/- Confusion
10	Totally Bed Bound	Unable to Do Any Activity Extensive Disease	Total Care	Mouth Care Only	Drowsy or Coma +/- Confusion
0	Death	---	---	---	---



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