Common Indicators for End Stage Diseases

All of these indicators do **not** need to be met to qualify for hospice services.

General Core Indicators

When attempting to evaluate whether or not a patient/resident is appropriate for hospice, consider the following:

- ⇒ Progression of disease
- ⇒ Frequent medical care/ER visits
- ⇒ Decrease in cognitive or physical ability
- ⇒ Significant or unexplained weight loss (over 10% in last 6 months)
- ⇒ Body Mass Index (BMI) <22kg/m2
- ⇒ Patient declining enteral/parenteral nutrition or has not responded to nutritional support
- ⇒ Frequent infections
- ⇒ Decubiti Ulcers—2 or more Stage 3 or 4
- \Rightarrow Karnofsky <50% or PPS < or = to 40%
- ⇒ Dysphagia or Aspiration Pneumonia in last 6 months
- ⇒ Multiple Co-Morbidities
- ⇒ Serum Albumin <2.5gm/dL</p>
- ⇒ Hct <41g/dl

End Stage Lung Disease

- ⇒ Cor pulmonale and right heart failure (RHF) secondary to pulmonary disease
- ⇒ Resting tachycardia > 100/minute
- ⇒ Disabling dyspnea at rest, poor response to bronchodilators resulting in decreased functional capacity
- ⇒ Progression of end-stage pulmonary disease per increasing visits to ER or hospitalizations for infections and/or respiratory failure
- \Rightarrow PO2 <56 (SaO2 <89%) or PCO2 >49

End Stage Heart Disease

- \Rightarrow Symptoms of CHF or angina even at rest
- ⇒ Discomfort with any physical activity
- ⇒ Symptomatic despite maximum medication management
- ⇒ Ejection Fraction <20%
- ⇒ History of Syncope or Cardiac Arrest
- ⇒ NY Heart Association Class IV
- ⇒ Presence of edema, SOB, oxygen in use, and/or pacemaker

End Stage Alzheimer's/Dementia

- ⇒ Inability to communicate, <6 words/ conversation
- ⇒ Inability to ambulate/dress without assist
- ⇒ Inability to sit up or hold head up
- ⇒ Weight loss and/or poor nutritional status
- ⇒ Dependence on most ADLs, incontinent of bowel and bladder
- ⇒ Complications with Sepsis, UTI, Decubiti and/or Aspiration Pneumonia

End Stage Liver Disease

- ⇒ PTT >5 seconds over control (INR >1.5)
- ⇒ Serum Albumin <2.5 mg/dl
- ⇒ Ascites, refractory to treatment or patient non-compliant
- ⇒ Spontaneous Bacterial Peritonitis
- ⇒ Hepatorenal Syndrome
- ⇒ Hepatic Encephalopathy, refractory to treatment, or patient non-compliant
- ⇒ Recurrent Variceal Bleeding, despite intensive therapy



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Common Indicators for End Stage Diseases

All of these indicators do **not** need to be met to qualify for hospice services.

Coma

- \Rightarrow Coma x 3 days with 3 of the following:
 - Abnormal Brain Stem response
 - ____ No response to painful stimuli
 - No verbal response
 - Serum Creatinine >1.5mg/dl
- ⇒ Decubiti Ulcer Stage 3 or 4
- ⇒ Karnofsky or PPS < or = to 40%</p>
- ⇒ Nutritional status poor
- ⇒ Weight loss >/= 10% during previous 6 months or >/= to 7.5% in previous 3 months
- ⇒ Medical complications: Pneumonia, URI, UTI

HIV

- ⇒ CD4+ Count <25 cells/mcL or persistent viral load >100,000 copies/ml
- ⇒ CNS or Systemic Lymphoma
- ⇒ Untreated or not responsive to treatment, wasting (loss of 33% lean body mass)
- → Mycobacterium Avium Complex (MAC) bacteremia, untreated/unresponsive to treatment
- ⇒ Visceral Kaposi's Sarcoma unresponsive to treatment
- ⇒ Renal Failure in the absence of dialysis



ALS

- ⇒ Inability to walk
- ⇒ Dependence on most ADL's
- ⇒ Difficulty swallowing
- ⇒ Barely intelligible speech
- ⇒ SOB, on oxygen at rest and refuses mechanical ventilation
- ⇒ Rapid progression in last year
- ⇒ Poor nutritional status, declines feeding tube
- ⇒ Potentially life-threatening complications (Recurrent Aspiration Pneumonia, Sepsis, Pyelonephritis)

Renal Disease

- ⇒ Declining dialysis and renal transplant
- ⇒ Serum Creatinine >8 mg/dl (>6 mg/dl for diabetics)
- ⇒ Creatinine Clearance <10 cc/min (<15 cc/min in diabetics)
- ⇒ Uremia (confusion, nausea, restlessness, pericarditis)
- ⇒ Oliguria (<400 cc/day)
- ⇒ Intractable Hyperkalemia (>7.0) not responsive to treatment

Neurological

- ⇒ Rapid progression of disease
- \Rightarrow Unable to walk
- ⇒ Unintelligible speech
- ⇒ Dependence in 2 or more ADLs
- ⇒ Nutritional status poor as evidenced by progressive weight loss, severe dysphagia
- ⇒ Serum Albumin of <2.5gm/dl</p>
- ⇒ Impaired breathing capacity, dyspnea at rest
- ⇒ Medical complications: UTI, URI, Sepsis or Decubiti

Stroke/CVA

- ⇒ Karnofsky Score or PPS < or = to 40%</p>
- → Medical complications of pneumonia, URI, UTI, infection
- ⇒ Inability to maintain hydration and caloric intake with one of the following:

Weight loss >10% during previous 6
months or ≥7.5% in previous 3 months

- ____ Serum Albumin <2.5 gm/dl
- Current history of pulmonary aspiration without effective response to speech language pathology intervention
- 24-hour calorie counts documenting inadequate caloric/fluid intake

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