

Liver Disease

Essential Criteria:

- ▶ Prothrombin time prolonged more than 5 seconds or INR >1.5
- ▶ Serum albumin <2.5% gm/dl
- ▶ Ascites, refractory to TX; spontaneous bacterial peritonitis, hepatorenal syndrome, hepatic encephalopathy refractory to TX or recurrent variceal bleeding

Supporting Criteria:

- ▶ Progressive malnutrition
- ▶ Muscle wasting with reduced strength and endurance
- ▶ Active alcoholism
- ▶ Hepatocellular carcinoma
- ▶ Hepatitis C refractory to Interferon treatment
- ▶ Hepatitis B positivity

Renal Disease

Essential Criteria:

- ▶ Patient not seeking dialysis or renal transplant
- ▶ Serum creatinine >8.0mg/dl (>6.0mg/dl for diabetics)

Supporting Criteria:

- ▶ Uremia
- ▶ Serum K >7.0 mEq/L not responding to TX
- ▶ Oliguria, 400 cc/24 hours
- ▶ Hepatorenal syndrome
- ▶ Sepsis
- ▶ Fluid overload
- ▶ Uremic pericarditis
- ▶ Nausea, uremia, pruritis, sedation, confusion, restlessness
- ▶ Multiple comorbid conditions

Reference Guide

This comprehensive reference guide has been developed exclusively for use by healthcare professionals in determining the eligibility of possible hospice patients. In the event additional information or assessments might be necessary, Copper Communities Hospice clinical staff members are available to speak with you at your convenience.

Core Indicators for

Hospice Care:

- ▶ Patient has life-limiting condition with a clinical progression of 6 months or less as determined by the patient's attending physician and the Hospice Medical Director
- ▶ Weight loss >10% over 6 months, serum albumin <2.5gm/dl
- ▶ Dependence in activities of daily living (dressing, bathing, feeding, continence of urine and stool, transfers, and ambulation to bathroom)
- ▶ The patient/designated decision-maker and the attending ordering MD, agrees with a plan for care for palliation and comfort care
- ▶ Patient has experienced an increased number of emergency room visits, hospitalizations or physician's visits related to the hospice diagnosis



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Key Core Indicators for Admissions

Stroke and Coma

Essential Criteria:

Acute-Phase - Hemorrhagic or Ischemic

- ▶ Coma or persistent vegetative state secondary to stroke-beyond three days
- ▶ Post anoxic stroke-coma obtundation with myoclonus more than 3 days
- ▶ Dysphagia severe enough to prevent the patient from receiving food and fluids to sustain life

Essential Criteria:

Chronic Phase

- ▶ Palliative Performance Scale score <50%
- ▶ Post stroke dementia-unable to do ADL's without assistance
- ▶ Poor nutritional states, whether artificial or not; weight loss of greater than 10% over six months, serum albumin <2.5gm/dl

Supporting Criteria:

- ▶ Medical complications related to debility and progressive clinical decline; aspiration pneumonia
- ▶ Pyelonephritis, sepsis, refractory stage 3-4 decubitus ulcers, fever recurrent after antibiotics
- ▶ Documentation of various diagnostic imaging factors which support poor prognosis after stroke

Dementia due to Alzheimer's and Related Disorders

Essential Criteria:

Acute-Phase - Hemorrhagic or Ischemic:

- ▶ Unable to do ADL's /Ambulate without assistance
- ▶ Unwilling/unable to take sufficient foods/fluids
- ▶ No meaningful verbal communication; limited to six or fewer intelligible words
- ▶ Loss of 10% body weight in the previous 6 months or one of the other supporting criteria
(listed below)

Supporting Criteria:

(within the past 12 months)

- ▶ Aspiration pneumonia
- ▶ Urinary tract infection
- ▶ Septicemia
- ▶ Decubitus ulcers, multiple stage 3-4
- ▶ Fever recurrent after antibiotics
- ▶ Serum albumin <2.5%gm/dl

For questions or referrals call or visit

480.398.2411

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Heart Disease

Essential Criteria:

- ▶ Optimally treated with diuretics, vasodilators
- ▶ Discomfort with any physical activities
- ▶ Presence of NYHA Class IV CHF or angina at rest

Supporting Criteria:

- ▶ Ejection fraction is less than 20%
- ▶ Arrhythmias resistant to treatment
- ▶ History of cardiac arrest or resuscitation
- ▶ Unexplained syncope
- ▶ Cardiogenic embolic stroke

Cancer

Essential Criteria:

- ▶ Disease with distant metastases at presentation OR
- ▶ Progression of disease with either:
 - ▶ A continued decline in spite of therapy
 - ▶ Patient declines further disease directed therapy

Supporting Criteria:

- ▶ Certain cancers with poor prognosis (e.g. small cell lung, brain, and pancreatic) may be eligible without meeting the other criteria above

Amyotrophic Lateral Sclerosis (ALS)

Essential Criteria:

- ▶ P-Significant dyspnea at rest (requiring supplemental oxygen at rest) declines artificial ventilation
- ▶ Critical nutritional impairment rapid progression of ALS (12 months preceding)
- ▶ WC or bed bound status, barely or unintelligible speech, pureed diet, major assist in ADL's, continued weight loss, insufficient intake, dehydration or hypovolemia
- ▶ Life-threatening complications, aspiration pneumonia, urinary tract infection, sepsis, recurrent fever after antibiotic therapy

Pulmonary Disease

Essential Criteria:

- ▶ Poor or unresponsive to bronchodilators
- ▶ Progression of disease evidenced by increasing ER visits, hospitalizations, pulmonary infections, or respiratory failure
- ▶ O2 saturation <88% room air or pO2 <55 or pCO2 >50mmHg (ABG)
- ▶ Fluid overload
- ▶ Uremic pericarditis
- ▶ Nausea, uremia, puritis, sedation, confusion, restlessness

Supporting Criteria:

- ▶ Cor pulmonale
- ▶ Weight loss of greater than 10% of body weight over the preceding 6 months
- ▶ Resting tachycardia >100/min