IS YOUR PATIENT ELIGIBLE FOR HOSPICE?

A checklist for clinicians including emergency department staff

General Hospice Eligibility Guidelines:

- ☐ Dependent in 2-3 of 6 ADLs
- ☐ Shortness of breath at minimal exertion
- ☐ Multiple ER visits/hospitalizations
- ☐ 10% weight loss in the last 6 months
- ☐ Recurring falls with injuries
- ☐ Decreased tolerance of physical activities

Diagnosis-Specific Hospice Eligibility Guidelines:

Sepsis

☐ Hospice-eligible but not previously identified.

The prognosis worsens with the following:

- *Vasopressors*
- *Mechanical ventilation*
- *Hyperlactatemia*
- *Acute kidney injury*
- *Hepatic injury*
- *Thrombocytopenia*

Alzheimer's Disease and Other Dementias

Consider hospice if a patient meets both:

☐ Dependent in 3/6 ADLs

☐ One of the following complications:

- *Pneumonia*
- *Recurring UTIs*
- *Sepsis*
- *Weight loss (10% in 6 months)*
- *Hip fracture*
- *Two, stage 3 or 4 pressure ulcers*
- *Difficulty swallowing*
- *Feeding tube consideration*
- *Delirium*

Cancer

Consider hospice if a patient meets both:

☐ Spends 50% of the time in bed or chair during waking hours

☐ No longer pursuing chemotherapy and/or immunotherapy

Lung Disease

Consider hospice if a patient meets both:

☐ Dyspnea at rest/with minimal exertion using oxygen therapy

☐ One of these progressions:

- *Frequent ER visits/hospitalizations*
- *Cor pulmonale*

Heart Disease

Consider hospice if a patient meets all:

☐ NYHA Class III or IV

(fatigue, angina, or dyspnea at rest or with minimal exertion)

☐ Multiple ER visits or hospitalizations

☐ Not a surgical candidate

Liver Disease

Consider hospice if a patient meets both:

☐ INR > 1.5 and serum albumin < 2.5 g/dl

☐ One of the following complications:

- *Recurring ascites*
- *Spontaneous bacterial peritonitis*
- *Hepatic encephalopathy*
- *Variceal bleed*
- *Weight loss of 10%*
- *Hepatorenal syndrome/"HRS"*

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