

Adult and Pediatric Palliative Care

Office/ Consult Line 323-409-8532

IPT C5G100

HOSPICE ELIGIBILITY

GENERAL GUIDELINES

- Life limiting condition with life expectancy of 6 months or less if disease runs its normal course
- Patient/ designated decision-maker and primary team/ attending MD agree with plan of care for palliation and comfort care
- Patient/ designated decision-maker understands and signs informed consent for hospice
- ** Physician needs to sign Certificate of Terminal Illness
- ** DNR/DNI is NOT a requirement for hospice eligibility
- ** Please contact the Community Nurse Coordinators (CNC) for ALL hospice referrals

CLINICAL CHANGES INDICATING POOR PROGNOSIS

- Karnofsky or PPS decline $\leq 70\%$
- Dependence on 2 or more ADL's
- Unintentional weight loss (10% body weight/ 6 months)
- Decreasing anthropomorphic measurements (i.e. mid-arm circumference, abdominal girth) not due to reversible causes
- Decreased albumin $< 2.5\text{g/dL}$ or decreased cholesterol
- Dysphagia leading to inadequate oral intake or recurrent aspiration
- Decreased systolic blood pressure < 90 or progressive postural hypotension
- Recurrent or intractable infections (i.e. pneumonia, pyelonephritis, sepsis, etc.)
- Increased visits to ER/ hospital/ MD
- Progressive stage 3-4 pressure ulcers
- Progression of disease

NON-SPECIFIC DISEASE BASELINE GUIDELINES

- A. Karnofsky or PPS decline $\leq 70\%$**
- B. Dependence on 2 or more ADL's**
- C. Comorbidities (presence likely contributes to life expectancy of 6 months or less)**
 - a. Chronic Obstructive Pulmonary Disease
 - b. Congestive Heart Failure
 - c. Ischemic Heart Disease
 - d. Diabetes Mellitus
 - e. Neurologic Disease (ALS, MS, Parkinson's)
 - f. Renal Failure
 - g. Liver Disease
 - h. Neoplasia
 - i. Acquired Immune Deficiency Syndrome
 - j. Dementia
 - k. Refractory Severe Autoimmune Disease (Lupus, Rheumatoid Arthritis)

Karnovsky Performance Scale

100	Normal, no symptoms
90	Normal activity, minor symptoms
80	Normal activity, moderate symptoms
70	Unable to continue normal activity
60	Requires occasional assistance
50	Considerable assistance, medical care
40	Disabled, special assistance and care
30	Severely disabled, constant care
20	Very sick, active treatment needed
10	Moribound, fatal processes active
0	Dead

Adapted from Center for Medicare and Medicaid Services Local Coverage Determination (reviewed 4/2009)

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DISEASE SPECIFIC GUIDELINES

** These guidelines are to be used in conjunction with the “Non-specific Disease Baseline Guidelines”

AMYOTROPHIC LATERAL SCLEROSIS

- *Given differing patterns of disease progression from patient to patient, recommend examination by neurologist within three months of assessment for hospice to confirm diagnosis and assist with prognosis.*
 - Critically impaired breathing capacity (FVC < 40%) not electing tracheostomy or invasive ventilation
 - Severe nutritional insufficiency with or without use of gastrostomy tube

CANCER

- Disease with metastases at presentation OR
- Progression from earlier disease stage to metastatic disease with EITHER
 - Continued decline in spite of therapy
 - Patient declines further disease directed therapy

STROKE

- Karnofsky or PPS < 40%
- Inability to maintain hydration and caloric intake with ONE of the following:
 - Weight loss > 10%/ 6 months
 - Weight loss > 7.5%/ 3 months
 - Serum albumin < 2.5 g/ dL
 - Current history of pulmonary aspiration not responsive to speech language pathology intervention
 - Dysphagia severe enough to prevent oral intake necessary to sustain life and patient does not receive artificial nutrition and hydration

COMA (any etiology)

ANY of the following on Day 3: <ul style="list-style-type: none">- Abnormal brain stem response- Absent verbal response- Absent withdrawal response to pain- Serum creatinine > 1.5 mg/ dL	Supporting Criteria: <ul style="list-style-type: none">- Aspiration pneumonia- Pyelonephritis- Stage 3-4 decubitus ulcers- Recurrent fever after antibiotics
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DEMENTIA

<p>ALL of the following characteristics:</p> <ul style="list-style-type: none"> - FAST ≥ 7 - Unable to ambulate without assistance - Unable to dress without assistance - Unable to bathe without assistance - Urinary and fecal incontinence (intermittent or constant) - No consistently meaningful verbal communication (stereotypical phrases only, < 6 intelligible words in an average day) 	<p>ONE of the following within past 6 months:</p> <ul style="list-style-type: none"> - Aspiration pneumonia - Pyelonephritis - Septicemia - Multiple stage 3-4 decubitus ulcers - Fever (recurrent after antibiotics) - Inadequate oral intake with 10% weight loss/ 6 months or serum albumin <2.5g/dL
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HEART DISEASE

<p>Must meet A and B:</p> <ul style="list-style-type: none"> A. Optimal medical management (non-surgical candidates or decline procedures) B. NYHA class IV (symptoms at rest, discomfort with any activity) 	<p>Supporting criteria:</p> <ul style="list-style-type: none"> - Ejection fraction $\leq 20\%$ - Symptomatic arrhythmias resistant to treatment - History of cardiac arrest or resuscitation - Brain embolism of cardiac origin - Concomitant HIV disease
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HIV DISEASE

<p>Must meet A and B:</p> <ul style="list-style-type: none"> A. CD4 count < 25 cells/ mcl and viral load > 100,000 copies/ ml (2 or more assays at least 1 month apart) and ONE of the following: <ul style="list-style-type: none"> - CNS lymphoma - Loss of 10% lean body mass - Mycobacterium Avium Complex bacteremia, untreated, refractory or treatment refused - Progressive multifocal leukoencephalopathy - Systemic lymphoma - Refractory visceral Kaposi's sarcoma - Renal failure in absence of dialysis - Cryptosporidium infection - Toxoplasmosis unresponsive to therapy B. Karnofsky decline $\leq 50\%$ 	<p>Supporting criteria:</p> <ul style="list-style-type: none"> - Chronic diarrhea > 1 year - Serum albumin < 2.5 g/dL - Concomitant active substance abuse - Age > 50 years - Absence or resistance to effective antiretroviral, chemotherapeutic, and prophylactic HIV related drug therapy - Advanced AIDS dementia complex - Toxoplasmosis - CHF (symptomatic at rest) - Advanced liver disease
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LIVER DISEASE

<p>Must meet A, B, and C:</p> <ul style="list-style-type: none"> A. Prothrombin time > 5 seconds over control or INR > 1.5 B. Serum albumin < 2.5 g/dL C. End stage liver disease is present and shows ONE of the following: <ul style="list-style-type: none"> - Ascites, refractory to treatment or noncompliance - Spontaneous bacterial peritonitis - Hepatorenal syndrome (Elevated BUN & creatinine, oliguria with UOP < 400 ml/day, and urine sodium concentration < 10 mEq/l) - Recurrent variceal bleeding despite therapy 	<p>Supporting criteria:</p> <ul style="list-style-type: none"> - Progressive malnutrition - Muscle wasting with reduced strength and endurance - Continued active alcoholism - Hepatocellular carcinoma - HbsAg (Hepatitis B) positivity - Hepatitis C refractory to interferon treatment
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PULMONARY DISEASE

<p>Must meet A, B, and C:</p> <ul style="list-style-type: none"> A. Disabling dyspnea at rest, poorly/ unresponsive to bronchodilators <ul style="list-style-type: none"> - FEV1 < 30% predicted (if available) B. Progression of disease as evidenced by increasing visits to ER/ MD <ul style="list-style-type: none"> - Serial decrease of FEV1 > 40ml/ year (if available) C. Hypoxemia at rest on room air (pO2 ≤ 55 mmHg or O2 saturation < 88%) OR hypercapnia (pCO2 ≥ 50 mmHg) 	<p>Supporting criteria:</p> <ul style="list-style-type: none"> - Right heart disease secondary to pulmonary disease (Cor pulmonale) - Unintentional progressive weight loss > 10% body weight/ 6 months - Resting tachycardia > 100/ minute
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RENAL DISEASE

<p>Must meet A and either B, C, or D:</p> <ul style="list-style-type: none"> A. Not seeking dialysis or renal transplant B. Creatinine clearance < 10 cc/ min <ul style="list-style-type: none"> - < 15 cc/ min for diabetes or CHF - < 20 cc/ min for diabetes and CHF C. Serum creatinine > 8 mg/ dL <ul style="list-style-type: none"> - > 6 mg/ dL for diabetes D. Estimated GFR < 10 ml/ min <p>Signs and symptoms of renal failure</p> <ul style="list-style-type: none"> - Uremia - Uremic pericarditis - Hepatorenal syndrome - Oliguria (400cc/ 24hours) - Intractable hyperkalemia - Intractable fluid overload 	<p>Supporting criteria:</p> <ul style="list-style-type: none"> - Mechanical ventilation - Malignancy (other organ system) - Advanced cardiac or liver disease - Chronic lung disease - Immunosuppression/ AIDS - Albumin < 3.5 g/dL - Platelet count < 25,000 - Disseminated intravascular coagulation - Gastrointestinal bleeding
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