# Criteria for Palliative and Hospice Care

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| Disease Process  | Supportive/Palliative Care | Hospice Care |
| Cancer | * Uncontrolled signs or symptoms due to cancer or treatment
* Increase in hospitalizations/ER
 | * Metastatic or inoperable cancer
* No plans for treatment or scans
* Not on chemo meds or patient willing to pay for these of has supply to take
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| Heart Disease  | * Stage III-IV heart failure despite optimal medication management
* Angina refractory to medical or interventional management
* Frequent ER visits or hospitalizations
 | * Heart failure symptoms at rest
* Ejection fraction less than 20%
* New dysrhythmia
* Cardiac arrest or syncope
* Frequent ER visits or Hospitalizations
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| Pulmonary Disease  | * Oxygen dependent, sats <88% RA
* Unintentional weight loss
* Dyspnea with minimal to moderate exertion
* Other pulmonary diseases, i.e., fibrosis, pulmonary hypertension
 | * Dyspnea at rest
* Signs or symptoms heart failure
* Sats < 88%
* PC02 > 50
* Unintentional weight loss
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| Dementia  | * Behavioral problems increasing
* Feeding problems with weight loss
* Caregiver stress
* Frequency ED visits
* Safety concerns increasing
* Falls
 | * Unable to walk, bathe, or dress self
* Incontinence
* Less than six intelligible words
* Frequent ER visits
* Dysphagia
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| Liver Disease  | * Ascites
* Hepatic encephalopathy
* Safety concerns
 | * INR >5
* Albumin < 2.5
* Increasing ascites
* Jaundice
* Malnutrition
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| Renal Disease  | * Dialysis
* Stage IV or V chronic disease
* Comorbidities of other chronic disease, wounds, confusion
 | * Not a candidate or refuses dialysis
* Serum creatinine >6.0
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| Neurologic Decline | * Stroke, Parkinson’s, ALS, MS, cognitive changes, feeding issue with weight loss
 | * Frequent ER visits
* Decubitus ulcers
* Bedbound
* Dysphagia
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