# 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 |
| 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 |
| 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 |
| 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 |
| Liver Disease | * Ascites * Hepatic encephalopathy * Safety concerns | * INR >5 * Albumin < 2.5 * Increasing ascites * Jaundice * Malnutrition |
| 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 |
| Neurologic Decline | * Stroke, Parkinson’s, ALS, MS, cognitive changes, feeding issue with weight loss | * Frequent ER visits * Decubitus ulcers * Bedbound * Dysphagia |