



# Heart to Heart Hospice

## Guidelines for Determining Prognosis

### End Stage Renal Disease

Required: 1 & 2 or 1 & 3

1. Discontinuation or refusal of dialysis or renal transplant
2. Creatinine clearance < 10 cc/min (< 15 cc/min for diabetics) or < 15 cc/min (< 20 cc/min for diabetics) with co-morbidity of CHF
3. Serum Creatinine > 8.0 mg/dl (> 6.0 mg/dl for diabetics)

### Stroke and Coma

Stroke: 1 & 2 required

1. PPS < 40%
2. Inability to maintain hydration and caloric intake with one of the following:
  - a. Wt loss > 10% during previous 6 months (or)
  - b. Wt loss > 7.5% in previous 3 months
  - c. Serum albumin < 2.5 gm/dl
  - d. Current history of pulmonary aspiration without effective response to speech language pathology intervention to improve Dysphagia and decrease aspiration events
  - e. Calorie counts documenting inadequate caloric / fluid intake

### Coma: any 3 of the following on day 3

1. Abnormal brain stem response
2. Absent withdrawal response to pain
3. Absent verbal response
4. Serum Creatinine > 1.5 mg/dl

### Adult Failure to Thrive

ALL are required:

1. BMI < 22 kg/m<sup>2</sup>
2. PPS < 40%
3. Unresponsive to or declining enteral / parenteral nutritional support

### Alzheimer's Disease and Related Disorders:

1. FAST Scale (> 7 is required by the LCD)
  - 7a: limited ability to speak (1 - 5 words a day)
  - 7b: all intelligible vocabulary is lost
  - 7c: non-ambulatory
  - 7d: unable to sit up independently
  - 7e: unable to smile
  - 7f: unable to hold head up
2. Secondary conditions (at least ONE within the past 12 months):
  - a. Aspiration pneumonia;
  - b. Pyelonephritis or other upper UTI;
  - c. Septicemia;
  - d. Decubitus ulcers, Stage III-IV;
  - e. 10% weight loss or albumin < 2.5 gm/dl;
  - f. Delirium.

### End Stage Liver Disease

ALL are required:

1. Prothrombin time prolonged more than 5 sec over control (OR) INR > 1.5
2. Serum albumin < 2.5
3. Pt shows at least ONE of the following:
  - a. Ascites, refractory to treatment or Pt non-compliant;
  - b. Spontaneous bacterial peritonitis;
  - c. Hepatorenal syndrome (elevated creatinine and BUN with oliguria < 400 cc/day and urine sodium < 10 mEq);
  - d. Hepatic encephalopathy (decreased awareness, disturbed sleep, depressed, emotionally labile, somnolence, slurred speech);
  - e. Recurrent variceal bleeding despite intensive therapy.

### Terminal Stage of Cancer

Required: 1 (or) 2

1. PPS < 70%; Disease with distant metastases at presentation of: Bone, Liver, Lung, Brain, Other

2. Progression from an earlier stage of disease to metastatic disease with either of the following;

- a. Continuous decline despite therapy (OR)
- b. Pt. terminates disease-directed therapy

### Cardiopulmonary Conditions

Cardiac Disease: 1 & 2 should be present

1. Optimally treated with diuretics & vasodilators (ACE inhibitors); If not, must document why.
2. Class IV of NY Heart Association (unable to carry out physical activity without symptoms increasing. Symptoms present at rest)
3. Unstable angina present at rest, resistant to nitrate therapy or declines invasive procedures

### Pulmonary Disease: ALL are required

1. Disabling dyspnea at rest, poor or unresponsive to bronchodilators resulting in decreased functional capacity, e.g. bed to chair existence, fatigue and cough
2. Decrease in FEV 1 < 30% if available
3. Progression of end stage pulmonary disease, as evidenced by prior increasing visits to the ER or current / prior hospitalizations over previous 6 months & / or last benefit period for respiratory infections & / or respiratory failure
4. Hypoxemia at rest on room air, as evidenced by  $\leq 55$ mm/Hg or sat  $\leq 88\%$  on supplemental oxygen
5. Hypercapnia with > 50mm/Hg, if available

### Terminal Stage ALS

Required: 1, 2 & 3 (OR) 1 & 4

1. Rapid progression of disease as demonstrated by progression from:
  - a. Ambulation to wheelchair or bed-bound status
  - b. Normal to barely intelligible or unintelligible speech
  - c. Normal to Pureed diet
  - d. Independent in most / all ADL's to needing major assistance from caregivers with ADL's
2. Critically impaired breathing capacity:
  - a. Vital Capacity < 30% of normal
  - b. Significant Dyspnea at rest
  - c. Declines artificial ventilation; external ventilation used for comfort measures only
3. Critical nutritional impairment:
  - a. Oral intake of nutrients and fluids insufficient to sustain life
  - b. Continued weight loss
  - c. Dehydration or Hypovolemia
  - d. Absence of artificial feeding methods
4. Life-threatening complications as evidenced by:
  - a. Recurrent aspiration Pneumonia
  - b. Upper UTI
  - c. Sepsis
  - d. Recurrent fever after antibiotics
  - e. Decubitus ulcers, Stage III-IV

### HIV

ALL are required:

1. CD4 ÷ Count < 25 cells/mcL or persistent viral load > 100,000 copies/ml, plus ONE of the following:
  - a. CNS Lymphoma;
  - b. Untreated, or unresponsive to treatment, wasting (loss of 33% lean body mass);
  - c. MAC Infection, untreated, unresponsive to treatment;
  - d. Cryptosporidium infection;
  - e. Systemic lymphoma; with advanced HIV disease
  - f. Progressive multifocal leukoencephalopathy;
  - g. Visceral Kaposi's Sarcoma, unresponsive to therapy;
  - h. Toxoplasmosis, unresponsive to therapy;
  - i. Renal failure without dialysis.
2. PPS < 50%

## Heart to Heart Hospice

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