



ADMISSION GUIDELINES

General Guidelines to Determine Hospice Admission

The patient has a “life limiting” condition – due to a specific disease, a combination of diseases, or due to an undetermined cause, and clinical decline the last 6 months—documented by physician or nurse evaluation, laboratory or radiological studies, or increased hospital or emergency department admissions.

The treatment goal is for relief of symptoms, not cure.

The patient requires “considerable assistance and frequent medical care”—evidenced by assistance required in 3 or more ADLs: bathing, feeding, dressing, transfers, continence and ability to ambulate independently to the bathroom, OR nutritional decline, a weight loss of $\geq 10\%$ of body weight in the last 6 months, OR meets specific criteria for disease type.

Specific Criteria – Common Cancer Diagnosis

Lung	Breast	Colon	Prostate
Small Cell Untreated or relapse post treatment	Metastatic disease	Metastatic disease	Metastatic disease
Non Small Cell Unresectable or relapse post treatment	& Undergoing no treatment	& Advanced local disease	& Clear clinical decline over the last 6 months.

Specific Criteria – Non Cancer Types

Congestive Heart Failure/Angina	Chronic Obstructive Pulmonary Disease	Dementia	HIV Disease
Shortness of breath or chest pain at rest. & Diuretic and Vasodilators optimized & Recurrent dysrhythmias or history of syncope; or baseline systolic BP less than 120, or history of cardiac arrest	Dyspnea with minimal exertion or at rest & Hypoxia on O2 (O2 sat<88) OR Hypercapnea >50	Inability to ambulate independently & Some incontinence of bowel and bladder & Little or no intelligible speech & At least one secondary complication in the last year. (Pneumonia, Sepsis, etc.)	A CD4 count of less than 25 & Terminal secondary process (eg. CNS lymphoma, PML, Wasting syndrome, Toxoplasmosis, AIDS, dementia complex) OR Viral load >100,000