NEUROLOGIC DISEASE
Criteria are very similar for chronic degenerative conditions such as: ALS, Parkinson’s, Muscular Dys trophy, Myasthenia Gravis or Multiple Sclerosis

The patient must meet at least one of the following criteria (1 or 2A or 2B):

1. Critically impaired breathing capacity, with all:
   Dyspnea at rest, Vital capacity < 30%, Need O2 at rest, patient refuses artificial ventilation
   AND
   2. Rapid disease progression with either A or B below:
   Progression from:
   independent ambulation to wheelchair or bed-bound status
   normal to barely intelligible or unintelligible speech
   normal to pureed diet
   independence in most ADLs to needing major assistance in all ADLs

   OR

   A. Critical nutritional impairment demonstrated by all of the following in the preceding 12 months:
   Oral intake of nutrients and fluids insufficient to sustain life
   Continuing weight loss
   Dehydration or hypovolemia
   Absence of artificial feeding methods
   AND

   B. Life-threatening complications in the past 12 months as demonstrated by ≥1:
   Recurrent aspiration pneumonia, Pyelonephritis, Sepsis, Recurrent fever, Stage 3 or 4 pressure ulcer(s)

STROKE OR COMA
The patient has both 1 and 2.
1. Poor functional status PPS* ≤ 40%
   AND
   2. Poor nutritional status with inability to maintain sufficient fluid and calorie intake with ≥1 of the following:
   ≥ 10% weight loss in past 6 months
   ≥ 7.5% weight loss in past 3 months
   Serum albumin < 2.5 gm/dl
   Current history of pulmonary aspiration without effective response to speech therapy interventions to improve dysphagia and decrease aspiration events

   Supporting documentation includes:
   Coma (any etiology) with 3 of the following on the third (3rd) day of coma:
   Abnormal brain stem response
   Absent verbal responses
   Absent withdrawal response to pain
   Serum creatinine > 1.5 gm/dl

REFERENCES:

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**Palliative Performance Scale (PPS)**

The patient has both 1 and 2:
1. Stage 7C or beyond according to the FAST Scale
2. One or more of the following conditions in the 12 months:
   - Aspiration pneumonia
   - Pyelonephritis
   - Septicemia
   - Multiple pressure ulcers (stage 3-4)
   - Recurrent Fever
   - Other significant condition that suggests a limited prognosis
Inability to maintain sufficient fluid and calorie intake in the past 6 months (10% weight loss or albumin < 2.5 gm/dl)

**Functional Assessment Scale (FAST)**

1. No difficulty either subjectively or objectively.
2. Complains of forgetting location of objects.
3. Decreased job functioning evident to co-workers. Difficulty in traveling to new locations. Decreased organizational capacity.
4. Decreased ability to perform complex task, (e.g., planning dinner for guests, handling personal finances e.g. forgetting to pay bills, etc.)
5. Occasionally or more frequently over the past weeks. * for the following
   - A) Improperly putting on clothes to wear for the day, season or occasion, (e.g. pt may wear the same clothing repeatedly, unless supervised.
   - B) Inability to carry out even minimal physical activity
   - C) Not able to choose proper water temp
   - D) Urinary incontinence
   - E) Fecal incontinence

   *Ability to speak limited to approximately 6 intelligible different words in the course of an average day or in the course of an intensive interview.
   - B) Speech ability is limited to the use of a single intelligible word in an average day or in the course of an intensive interview.
   - C) Ambulatory ability is lost (cannot walk without personal assistance.)
   - D) Cannot sit up without assistance (e.g., the individual will fall over if there are not lateral rests [arms] on the chair.)
   - E) Loss of ability to smile.
   - F) Loss of ability to hold up head independently.

*Scored primarily on information obtained from a knowledgeable informant.*

**Dementia**

The patient has either 1A or 1B and 2 and 3.
1A. CD4+ < 25 cells/mcL
1B. Viral load > 100,000
OR
1B. Viral load > 100,000
AND
2. One or more of the following conditions in the 12 months:
   - Cryptosporidium infection
   - Refractory toxoplasmosis
   - Severe chronic lung disease as documented by 1, 2, and 3.
1. CHF with NYHA Class IV symptoms & both:
   - Significant symptoms at rest
   - Inability to carry out even minimal physical activity without dyspnea or angina
2. Patient is optimally treated (i.e diuretics, vasodilators, ACEI, or hydralazine and nitrates)
3. The patient has angina pectoris at rest, resistant to standard nitrates therapy, and is either not a candidate for/or has declined invasive procedures.

**Liver Disease**

The patient has both 1 and 2.
1. End stage liver disease as demonstrated by A or B, & C:
   - A. PT > 5 sec
   - B. INR > 1.5
   - C. Serum albumin < 2.5 gm/dl

**Pulmonary Disease**

Severe chronic lung disease as documented by 1, 2, and 3.
1. The patient has all of the following:
   - Disabling dyspnea at rest
   - Little or no response to bronchodilators
   - Decreased functional capacity (e.g. bed to chair existence, fatigue and cough)

**HIV/AIDS**

The patient has either 1A or 1B and 2 and 3.
1A. CD4+ < 25 cells/mcL
1B. Viral load > 100,000
OR
1B. Viral load > 100,000
AND
2. At least one (1) : CNS lymphoma, untreated or refractory wasting (loss of > 33% lean body mass), (MAC) bacteremia, Progressive multifocal leukoencephalopathy
   - Systemic lymphoma, visceral KS
   - Renal failure no HD
   - Cryptosporidium infection
   - Refractory toxoplasmosis

AND
3. PPS of < 50%