STROKE & COMA - Initial
Hospice of the Piedmont
Guideline Worksheet for Determining Terminal Prognosis – Stroke & Coma – Initial Certification

Patient Name: _____________________________________ ID# _____________ Certification Date: ________________

The following criteria will support a prognosis of six months or less if the terminal illness runs its normal course for patients with Stroke & Coma on initial certification.

Non-disease specific baseline guidelines: (both 1 and 2 should be met)
1) Physiologic impairment of function status: See Disease Specific Guideline #1 for Stroke below.
2) Dependence on assistance for 2 or more activities of daily living (ADLs):
   - Feeding
   - Ambulation
   - Continence
   - Transfer
   - Bathing
   - Dressing
   PLUS

Disease Specific Guidelines:
STROKE
1) Karnofsky Performance Status (KPS) or Palliative Performance Scale (PPS), of < 40%
   KPS or PPS (circle one) Score: ___________%
2) Inability to maintain hydration and caloric intake with one (1) of the following:
   a) Weight loss > 10% in the last 6 months
      or Wt. loss – in last 6 mos.: __________ lbs.  or in last 3 mos.: __________ lbs.
   b) Weight loss > 7.5% in the last 3 months
   c) Serum albumin < 2.5 gm/dl
      Serum albumin: ________________ gm/dl
   d) Current history of pulmonary aspiration not responsive to speech language pathology intervention
   e) Dysphagia severe enough to prevent the patient from receiving good nutrition and fluids necessary to sustain life, in a patient who declines or does not receive artificial nutrition and hydration.

COMA (any etiology)
Comatose patients with any three (3) of the following on Day 3 of coma:
   a) Abnormal brain stem response
   b) Absent verbal response
   c) Absent withdrawal response to pain
   d) Serum creatinine > 1.5 mg/dl
      Serum creatinine: ________________ mg/dl

Documentation of the following factors will support (but are not required) eligibility for hospice care:
Medical Complications, in the context of progressive clinical decline, within the previous 12 months, which support a terminal prognosis:
   a) Aspiration pneumonia
   d) Fever recurrent after antibiotics
   b) Upper urinary tract infection (pyelonephritis)
   e) Sepsis
   c) Refractory stage 3-4 decubitus ulcers

Diagnostic imaging factors that support poor prognosis after stroke include:
A. For non-traumatic hemorrhagic stroke:
   1) Large-volume hemorrhage on CT:
      a) Infratentorial: > 20ml
      b) Supratentorial: > 50 ml
   2) Ventricular extension of hemorrhage
   3) Surface area of involvement of hemorrhage > 30% of cerebrum
   4) Midline shift > 1.5 cm
   5) Obstructive hydrocephalus in patient who declines, or is not a candidate for, ventriculoperitoneal shunt

B. For thrombotic/embolic stroke:
   1) Large anterior infarcts with both cortical and subcortical involvement
   2) Large bihemispheric infarcts
   3) Basilar artery occlusion
   4) Bilateral vertebral artery occlusion

Comorbidities: A diagnosis that is not the primary hospice diagnosis nor related to the primary hospice diagnosis, but the presence and severity of such disease is likely to contribute to a life expectancy of 6 months or less. Such diseases are not related to the hospice diagnosis and do not therefore imply financial responsibility under the hospice benefit.

Form completed by: _____________________________________________________ Date: ________________