



## The Palliative Response

### **When to Consider Palliative Care**

Upon Admission:

Palliative care can often assist in improving symptom control for people with pain or other physical symptoms.

The palliative care team approach can assist you in relieving the emotional, social, and spiritual suffering patients may experience.

Palliative care can help you determine the eligibility of patients for supportive care services such as palliative care clinic, home health, and home hospice, which may provide needed assistance with home services, medications, and nurse case management.

Palliative care can help facilitate patient and family conferences to define Goals of Care, including advanced directives.

Cancer—Any patient whose cancer is metastatic or inoperable.

*When to Consider Palliative Care: Side One*



## The Palliative Response

### When to Consider Palliative Care

#### **Heart disease**

- CHF symptoms at rest
- EF of  $< 20\%$
- New dysrhythmia
- Cardiac arrest, syncope, or CVA
- Frequent ER visits for symptoms

#### **Pulmonary disease**

- Dyspnea at rest
- Signs or symptoms of right heart failure
- O<sub>2</sub> sat on O<sub>2</sub> of  $< 88\%$
- P CO<sub>2</sub>  $> 50$
- Unintentional weight loss

#### **Dementia**

- Inability to walk
- Incontinence
- Fewer than six intelligible words
- Albumin  $< 2.5$  or decrease PO intake
- Frequent ER visits

#### **Liver disease**

- PT  $> 5$  seconds
- Albumin  $< 2.5$
- Refractory ascites
- SBP
- Jaundice
- Malnutrition and muscle wasting

#### **Renal disease**

- Not a candidate for dialysis
- Creatinine clearance of  $< 15$  ml/minute
- Serum creatinine  $> 6.0$

#### **Failure to thrive**

- Frequent ER visits
- Albumin  $< 2.5$
- Unintentional weight loss
- Decubitus ulcers
- Homebound/bed-confined

When to Consider Palliative Care: Side Two