

## Clinical Points and Special Considerations for Hospice Admission

**Please note:** Please call the Bed Hub Coordinator (BHC) at (780)735-8353 with any clinical questions or concerns to ensure that the patient's needs are able to be met in hospice.

Patients must have Goals of Care Designation (RMC) of C1 or C2. A GCD of M2 may be considered following discussion.

### SUPPLIES

Supplies (for 2-3 days) may be requested by the admitting hospice to prevent delays in patient care.

\*Type, size and supply number must be documented in Pathways or on Hospice Out of Zone admission form.

- Ostomy supplies
- Latex-free supplies for patients with latex allergies
- Specific wound care supplies
- Tube feeding formulas (artificial nutrition will not be started in hospice)
- Special medication requests (Relistor, Hormone Therapies from CCI)
- PleurX and pigtail catheter supplies
- Tenckhoff catheter drainage supplies
- Chest/Abdominal tubes other than PleurX or Percutaneous Gastrostomy (PEG) tubes
- Other

### SPECIAL NEEDS

These situations **must be documented and discussed** with BHC. For patients with complex medical needs that are not listed in the guidelines, discussion with the BHC is encouraged to determine if the individual's care needs can be met in a hospice site.

- A review of the medications should occur
- Mature Tracheostomies will be accepted at EGH with discussion and advance planning
- High cost drugs
- Requirements for isolation/special precautions such as:
  - Methicillin Resistant Staph Aureus (MRSA)
  - Vancomycin Resistant Enterococci (VRE)
  - Hepatitis A, B and C
  - Extended Spectrum Beta-Lactamase Organisms (ESBL)
  - Human Immunodeficiency Virus (HIV)
  - Clostridium Difficile (C-Diff)
- Any procedure that requires transportation to an acute care facility such as paracentesis and thoracentesis, radiation therapy or follow up at the Cross Cancer Institute
- Patients/Families with extensive psycho/social/spiritual/financial will need to be discussed with the BHC
- Continuous Positive Airway Pressures (CPAP) can be managed at all sites
- High flow oxygen (more than 15L/min)
- Continuous Bladder Irrigation (CBI)

## SPECIAL NEEDS

*Continued*

- Out of province/country patients. Out of province patients will have initials for the province attached to their health care number (i.e. NB for New Brunswick). These patients can only be transferred to sites that have auxiliary hospital designation (EGH, St. Joes, Westview)
- Blood transfusions. Transfusions may be offered for symptom management only  
*\*Hospice admission is not indicated for patients who are transfusion dependent*
- Bi-level Positive Airway Pressure (BiPAP) or ventilator supports
- Implanted Cardiac Defibrillators (ICD) **must be deactivated** prior to hospice admission
- Medical marijuana. Smoking is not allowed at any facility. Patients are required to inform the facility if they have a medical marijuana authorization.
- Diagnostic tests and other assessments are not routinely ordered but may be suggested in order to support symptom management
- Bariatric specialty beds or surfaces that are different than the current mattresses provided in each hospice need to be arranged.
  - All sites have pressure relief mattresses
  - Continuing Care and Facility Living set the criteria for specialty surfaces. In general, approval for a specialty surface is determined by the: Braden score; wounds greater than Stage 3; weight (found in transport section of Pathways); functional status; oxygen needs and aspiration risk (may be difficult to position depending on the surface used)

### Care Needs that Do Not Meet Hospice Admission Criteria

Hospices are not able to accept patients who require the following.

- Initiation of artificial nutrition; maintenance of Total Parenteral Nutrition (TPN) or Peripheral Parenteral Nutrition (PPN)
- Optiflow and VapoTherm therapies
- Dialysis
- Platelet transfusion
- Peripheral intravenous lines, peripheral or central venous catheters used for any medications including antibiotics or fluid will **not** be accessed or maintained in hospice. It is preferable to remove these lines before admission to hospice. Dressings will be changed according to site protocol. **Metal butterfly needles must be removed prior to admission.**
- Negative Pressure Wound Therapy (NPWT) WoundVac
- Physical aggression of any kind
- Cognitively impaired patients who have wandering behaviors
- Laryngectomy tubes
- No medical marijuana or tobacco vaping
- \*Patients with longstanding cognitive impairment causing wandering behaviors who have limited functioning