

Best Practice... *in Palliative Care*

HOSPICE AND PALLIATIVE CARE REFERRAL

There is no exact formula for determining when to refer a patient for hospice or palliative care. The main goal is to provide a patient with a complete understanding of his or her choices for healthcare when facing life-limiting illness.

*When is referral to **hospice** care appropriate?* A patient may be referred when his or her plan of care calls for comfort measures and not the reversal of the underlying disease process. Patients with a six month or less prognosis and who are no longer receiving curative treatment have the opportunity to benefit from the emotional, spiritual and physical services of hospice care. Reinforce to your patient the collaborative nature of hospice care and that you will continue as his or her physician, he or she would continue office visits and may be admitted to the hospital, as coordinated by hospice, for symptom control. A patient may withdraw from the program or elect palliative care if goals change from comfort to curative treatment.

*When is referral to **palliative** care appropriate?* A patient facing a serious illness and continuing aggressive treatment may be referred for palliative

care. Palliative care is designed to achieve the best quality of life possible, relieve suffering, control symptoms and restore functional capacity. Palliative care complements a patient's current medical care. Unity's Palliative program is designed for people diagnosed with serious illness, regardless of prognosis or treatment options. Reassure your patient that you will continue to be involved in his or her treatment and care after election of palliative care services.

Referral to Unity's Hospice and Palliative programs early in a patient's diagnosis offers resources to help guide the patient and family through potential disease progression, treatment options, changing goals of care and any issues of life completion and closure. Working together the patient receives a coordinated plan of care between the patient and his or her healthcare providers designed to achieve the patient's goals. Additionally, as the patient's physician, you remain involved in his or her care.

For more information, visit our website at www.unityhospice.org

Did you know?

There are several websites that address clinical and program issues related to hospice and palliative care.

In fact, most of the information shared in Best Practices is taken from Fast Facts, a publication found on the EPERC website.

www.eperc.mcw.edu

www.nhpco.org

www.capc.org

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LEADERS IN HOSPICE AND PALLIATIVE CARE

A Caring Not-for-Profit Partnership of Bellin Health, St. Mary's and St. Vincent Hospitals

2366 Oak Ridge Circle • De Pere, WI 54115

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