

## Stroke/COMA

### STROKE

1. PPS of  $\leq 40\%$
2. Inability to maintain hydration and caloric intake w/ 1 of the following:
  - A. **Wt loss  $>10\%$  in the last 6 months or  $>7.5\%$  in the last 3 months**
  - B. **Serum albumin  $<2.5$  gm/dl**
  - C. Current hx of pulmonary aspiration not responsive to speech language pathology intervention
  - D. Sequential calorie counts documenting inadequate caloric/fluid intake
  - E. **Dysphagia severe enough to prevent pt from receiving food & fluids necessary to sustain life in a pt who declines or does not receive artificial nutrition & hydration.**

### COMA (any etiology)

**Demonstrates any 3 of the following on day 3 of coma:**

1. Abnormal brain stem response
2. Absent verbal response
3. Absent withdrawal response to pain
4. Serum creatinine  $>1.5$  mg/dl

**Documentation of the following will support eligibility for hospice care:**

1. Documentation of medical complications in context of progressive clinical decline, within previous 12 months, which support a terminal prognosis:

- A. Aspiration pneumonia
- B. Upper UTI (pyelonephritis)
- C. Sepsis
- D. Refractory stage 3-4 decubitus ulcer
- E. Fever recurrent after antibiotics

2. Documentation of diagnostic imaging factors which support poor prognosis after stroke:

- A. For non-traumatic hemorrhagic stroke:
  1. Large-volume hemorrhage on CT (infratentorial:  $\geq 20$ ml; supratentorial:  $\geq 50$  ml)
  2. Ventricular extension of hemorrhage
  3. Surface area of involvement of hemorrhage  $\geq 30\%$  of cerebrum
  4. Midline shift  $\geq 1.5$  cm
  5. Obstructive hydrocephalus in pt who declines or is not a candidate for ventriculoperitoneal shunt
- B. For thrombotic/embolic stroke:
  1. Large anterior infarcts w/ both cortical and subcortical involvement
  2. Large bihemispheric infarcts
  3. Basilar artery occlusion
  4. Bilateral vertebral artery occlusion

