

## Alzheimer's Disease, Dementia, Related Disorders

Stage 7 on the FAST Scale signifies the threshold of activity limitation that would support a six-month prognosis. The FAST Scale does not address the impact of comorbid and secondary conditions. Ultimately, despite the FAST Scale score, the combined effects of the Alzheimer's disease and any other comorbidities should support a six-month prognosis.

The patient has both 1 and 2.

### 1. Stage 7 or beyond according to the FAST scale

- Speech limited to <6 words/day
- Speech unintelligible
- Non-ambulatory
- Unable to sit independently
- Unable to smile
- Unable to hold head up

### 2. One or more of the following conditions in the past 12 months:

- Aspiration pneumonia
- Pyelonephritis
- Septicemia
- Multiple pressure ulcers ( stage 3-4)
- Recurrent fever
- Recurrent falls with injury
- Inability to maintain sufficient fluid and calorie intake in the past 6 months ( 10% weight loss or albumin < 2.5 gm/dl)
- Other significant condition that suggests a limited prognosis

## Cancer

Patient meets 1, 2 and 3.

1. Clinical findings of malignancy with widespread, aggressive or progressive disease as evidenced by increasing sx, worsening lab values and/or evidence of metastatic disease
2. Palliative Performance Scale (PPS)  $\leq$  70%
3. Refuses or is no longer a candidate for further life-prolonging therapy  
OR continues to decline in spite of definitive therapy

Supporting documentation includes:

- Hypocalcaemia  $>12$
- Cachexia or weight loss of 5% in past 3 months
- Recurrent disease after surgery/radiation/chemotherapy
- Signs and sx of advanced disease (e.g., nausea, requirement

For questions and referrals,  
call 847-692-8881

## Heart Disease

The patient has 1 and either 2 or 3.

1. CHF with NYHA Class IV sx and both: Significant sx at rest, inability to carry out even minimal physical activity without dyspnea or angina
2. Patient is optimally treated (e.g., diuretics, vasodilators, ACEI or hydralazine and nitrates)
3. The patient has angina pectoris at rest, resistant to standard nitrate therapy and is either not a candidate for/or has declined invasive procedures.

Supporting documentation includes:

- $EF \leq 20\%$
- Treatment resistant symptomatic dysrhythmias
- h/o cardiac related syncope
- CVA 2/2 cardiac embolism
- h/o cardiac resuscitation
- Concomitant HIV disease

## HIV / AIDS

The patient has both 1, 2 and 3.

1A. CD4+ < 25 cells/mcL

■ OR

1B. Viral load > 100,000 copies/ml

▶ AND / EITHER

2. At least one of the following:

- CNS or systemic lymphoma
- Untreated or refractory wasting (loss of > 33% lean body mass)
- MAC bacteremia
- Progressive multifocal leukoencephalopathy
- Systemic lymphoma
- Visceral Kaposi's sarcoma
- Renal failure w/o dialysis
- Cryptosporidium infection
- Refractory toxoplasmosis (resistant to treatment)

■ AND

3. Decreased performance status, as measured by a Palliative Performance Scale value of  $\leq 50\%$

## Liver Disease

The patient has both 1 and 2.

1. End stage liver disease as demonstrated by:

A.) INR > 1.5

■ OR

B.) Protime > 5 seconds over control

▶ AND

C.) Serum albumin <2.5 gm/dl

2. One or more of the following conditions:

- Ascites, refractory to treatment or patient non-compliant
- h/o spontaneous bacterial peritonitis
- Hepatorenal syndrome (elevated BUN/Cr and oliguria < 400 ml/day; urine Na < 10 mEq/L)
- Hepatic encephalopathy, refractory to treatment
- Recurrent variceal bleeding, despite treatment

Secondary or complicating conditions:

- Progressive malnutrition
- Muscle wasting with declining strength
- Active alcoholism
- Hep B w/ HBsAg positivity
- Hep C, refractory to interferon
- Hepatocellular carcinoma

## Neurological Disease

(Chronic degenerative conditions such as ALS, MS, Parkinson's, Muscular Dystrophy, Myasthenia Gravis or Multiple Sclerosis)

The patient must meet at least one of the following criteria (1 or 2A or 2B):

1. Critically impaired breathing capacity, with all: Dyspnea at rest, Vital capacity < 30%, Needs O2 at rest and refuses artificial ventilation

■ OR

2. Rapid disease progression with either A or B below:

Progression from:

- Independent ambulation to wheelchair or bed-bound status
- Normal to barely intelligible or unintelligible speech
- Normal to pureed diet
- Independence in most ADLs to needing major assistance in all ADLs

▶ AND

A.) Critical nutritional impairment demonstrated by all of the following in the preceding 12 months:

- Oral intake of nutrients and fluids insufficient to sustain life
- Continuing weight loss
- Dehydration or hypovolemia
- Absence of artificial feeding methods

■ OR

B.) Life-threatening complications in the past 12 months as demonstrated by  $\geq 1$ :

- Recurrent aspiration pneumonia, Pyelonephritis, Sepsis, Recurrent fever, Stage 3 or 4 pressure ulcers

## Pulmonary Disease

Severe chronic lung disease as documented by 1, 2 and 3.

1. The patient has all of the following:

- Disabling dyspnea at rest
- Little or no response to bronchodilators
- Decreased functional capacity (e.g., bed to chair existence, fatigue and cough)

▶ AND

2. Progression of disease as evidenced by a recent h/o increasing office, home or ED visits and/or hospitalizations for pulmonary infection and/or respiratory failure

▶ AND

3. Documentation within the past 3 months  $\geq$ 1:

- Hypoxemia at rest on room air (pO<sub>2</sub> < 55 mmHg by ABG) or oxygen saturation < 88%
- Hypercapnia evidenced by pCO<sub>2</sub> > 50 mmHg

Supporting documentation includes:

- Cor pulmonale and right heart failure; unintentional progressive

## Renal Disease

The patient has 1, 2 and 3.

1. The patient is not seeking dialysis or renal transplant

▶ AND

2. Creatinine clearance is <10 cc/min (<15 cc/min for diabetics)

▶ AND

3. Serum creatinine > 8.0 mg/dl (> 6.0 mg/dl for diabetics)

Supporting documentation for chronic renal failure includes:

- Uremia
- Oliguria (urine output < 400 cc in 24 hours)
- Intractable hyperkalemia (> 7.0)
- Uremic pericarditis
- Hepatorenal syndrome
- Intractable fluid overload

Supporting documentation for acute renal failure includes:

- Mechanical ventilation
- Malignancy (other organ system)
- Chronic lung disease
- Advanced cardiac disease
- Advanced liver disease



## Stroke / Coma

The patient has both 1 and 2.

1. Poor functional status PPS  $\leq$  40%
  - Mainly bed rest, minimal ambulation
  - Very limited activity, extensive disease
  - Mainly assistance with self-care

▶ AND

2. Poor nutritional status with inability to maintain sufficient fluid and calorie intake with  $\geq$ 1 of the following:
  - $\geq$  10% weight loss in past 6 months
  - $\geq$ 7.5% weight loss in past 3 months
  - Serum albumin  $<$ 2.5 gm/dl
  - Current history of pulmonary aspiration without effective response to speech therapy interventions to improve dysphagia and decrease aspiration events
3. If coma, a terminal prognosis is supported by any of the following at least 3 days after onset of coma:
  - Abnormal brainstem response
  - Absent verbal response
  - Absent withdrawal response to pain