

**KARNOFSKY PERFORMANCE
STATUS SCALE
DEFINITIONS RATING (%) CRITERIA**

Able to carry on normal activity and to work; no special care needed.	100 Normal no complaints; no evidence of disease
	90 Able to carry on normal activity; minimal signs or symptoms of disease.
	80 Normal activity with effort; some signs or symptoms of disease.
	<div style="background-color: #4CAF50; color: white; padding: 5px; display: flex; align-items: center;"> ▼ These patients may be hospice eligible. </div>
Unable to work; able to live at home and care for most personal needs; varying amount of assistance needed.	70 Cares for self; unable to carry on normal activity or to do active work.
	60 Requires occasional assistance, but is able to care for most personal needs.
	<div style="background-color: #4CAF50; color: white; padding: 5px; display: flex; align-items: center;"> ▼ These patients are hospice eligible. </div>
	50 Requires considerable assistance and frequent medical care.
	40 Disabled; hospital admission is indicated although death not imminent.
Unable to care for self; requires equivalent of institutional or hospital care; disease may be progressing rapidly.	20 Very sick; hospital admission necessary; active supportive treatment necessary.
	10 Moribund; fatal processes progressing rapidly.

Oxford Textbook of Palliative Medicine, Oxford University Press. 1993;109.

**CONSIDER
THESE QUESTIONS**

Do you believe cure is no longer possible?

Would you be surprised if this patient is still living within the next year?

Do you believe the patient and family would benefit from comfort care?



Guiding the way.

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Formerly Hospice of Baltimore and Howard County and Gilchrist Center

A *GBMC* AFFILIATE

**END-STAGE DISEASE
INDICATORS
for non-cancer
diagnosis**



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COMMON INDICATORS OF END-STAGE DISEASE

CORE INDICATORS

Physical Decline

- Weight Loss > 10% in past 6 months
- Multiple Comorbidities
- Serum Albumin < 2.5 gm/dl
- Dependence in most ADL's
- Karnofsky Score <= 50%

AMYOTROPHIC LATERAL SCLEROSIS (335.20)

- Unable to walk, needs assistance with ADL's
- Barely intelligible speech
- Difficulty swallowing
- Nutritional status down
- Declines feeding tube
- Significant dyspnea, on O2 at rest
- Declines assisted ventilation
- Medical complications -- pneumonia, URI, sepsis

CVA (436) & COMA (780.01)

- Persistent vegetative state
- Dysphagia
- Age > 70
- Post-stroke dementia
- Nutritional status down
- Medical complications
- Family wants palliative care

DEBILITY UNSPECIFIED (799.3)

- Multiple comorbidities with no primary diagnosis
- Weight loss > 10% in past 6 months
- Karnofsky < 50

Patient may exhibit ONE or MORE of the following Core and Disease-specific indicators. These are guidelines only. Clinical judgement is required for each case. Our staff will work with you to determine your patient's eligibility.

DEMENTIA (SENILE DEGENERATIVE BRAIN – 331.2 & ALZHEIMER'S – 331.0)

- Urinary and fecal incontinence
- No consistently meaningful verbal communication
- Unable to sit up or hold head up
- Complications: Aspiration pneumonia, UTI, sepsis, decubiti
- Dependent in 3 or more ADLs: eating, ambulating, dressing, toileting, hygiene
- Difficulty swallowing/eating
- Nutritional status down
- Weight loss > 10% in past 6 months
- Other comorbidities or rapid decline

HEART DISEASE (CHF – 428.0)

- Symptomatic despite maximal medical management with diuretics and vasodilators
- Arrhythmias resistant to treatment
- Ejection fraction < 20%
- History of cardiac arrest
- Cardiogenic embolic CVA

HIV/AIDS (042)

- CD4 < 25/ml
- CD4 > 50/ml plus non-HIV comorbidities
- Viral load > 100,000/ml and forego all antivirals
- Viral load < 100,000/ml plus complications
- Wasting syndrome
- CNS lymphoma
- PML (progressive multifocal leukoencephalopathy)
- Cryptosporidiosis
- MAC (mycobacterium avium complex)
- Visceral Kaposi's sarcoma, unresponsive to treatment
- Toxoplasmosis

- AIDS dementia
- Substance abuse
- Decision to forgo antiretroviral, chemotherapeutic and prophylactic drug therapy

LIVER DISEASE (571)

- PTT > 5 sec above control
- Serum albumin < 2.5g/dl
- Ascites despite maximum diuretics
- Peritonitis
- Hepatorenal syndrome
- Encephalopathy with asterixis, somnolence, coma
- Recurrent variceal bleeding

PULMONARY DISEASE (COPD – 496)

- Dyspnea at rest
- FEV1 < 30% after bronchodilators
- Pulmonary infections
- Cor pulmonale/right heart failure
- pO2 < 55mm Hg;
- O2 sat < 88% (on O2)
- Weight loss > 10% in past 6 months
- Resting tachycardia > 100/min

RENAL DISEASE (586)

- Creatinine Clear < 10cc/min (< 15cc/min in diabetics)
- No dialysis, no renal transplant
- Signs of Renal failure (confusion, nausea, puritius, restlessness)
- Intractable fluid overload
- Oliguria < 400cc/24hrs
- Hyperkalemia > 7.0mEq/L

ASK THE QUESTION

“Would I be surprised by this patient's death within the next year?”