

Do your advanced pulmonary patients and their caregivers need extra clinical and emotional support? Is your patient making frequent ER visits, suffering shortness of breath, chronic cough, and/or extreme fatigue? **Alive's hospice care may be able to help.**

Patients and their families **frequently** tell us they wish they had known about this benefit sooner because the added support of an interdisciplinary team hugely **improves quality of life** for the whole family.

*“The healing begins for the person and family when hospice comes in. Having skilled professionals attending to mom’s every need was humbling. But they were so good at it, they allowed us to relax and just be a family again, which is what we needed most.”*

- Son of a former Alive patient

## Not just hospice, *Alive Hospice*

- We partner with you to provide greater support to your patients and their loved ones
- More than 90% of patients receive care in their own homes
- Two residences for when caregivers need a respite or when required for symptom management
- Doctors and a pharmacist on staff to manage complex medication needs
- 24/7 Support at home with Henry Hooker Alive Connect: patients and caregivers can consult with a nurse immediately via an Alive iPad

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hospice | palliative | grief

## Support for Pulmonary Patients and Their Loved Ones

[AliveHospice.org](http://AliveHospice.org) | 615-327-1085

We provide loving care to people with life-threatening illnesses, support to their families, and service to the community in a spirit of enriching lives.



Accredited by the Joint Commission  
and has its Gold Seal of Approval

Alive is a 501(c)(3) charitable nonprofit. Alive is a trademark of Alive Hospice, Inc., and is registered in the United States Patent and Trademark Office.

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## What To Look For

These signs of pulmonary disease may make your patient eligible for the hospice benefit, including symptom management, emotional/spiritual care, and support for caregivers and loved ones.

- Frequent hospitalizations/ER visits
- Missed appointments
- Cyanosis of lips, earlobes, fingernails/toenails, extremities
- Redness of face and upper body
- Barrel-chested appearance
- Frequent office calls
- Shortness of breath/wheezing/chronic cough
- Extreme fatigue, cannot manage daily life tasks
- Muscle wasting/lack of appetite

*24/7 on call symptom management reduces ER trips and hospitalizations.*

## Is my patient eligible for hospice care?

Patients with advanced pulmonary disease are generally eligible for hospice care when progression of chronic pulmonary disease is evidenced by one or more of the following:

- Frequent use of medical services, including hospitalizations, ER visits
- Frequent bronchitis or pneumonia
- More than 10% body weight loss over six months
- Continuous chronic oxygen therapy
- Resting tachycardia over 100/min
- Steroid dependent
- Cyanosis
- Abnormal laboratory findings

### **Pulmonary Disease Plan of Care:**

Plans of care are developed with the patient's current physicians and are personalized for each patient based on their wishes, symptoms, and the needs of the caregiver/family.

## Symptom/ Problem

## Interventions

**Stress, despair, depression, anxiety in patient and/or their caregivers/loved ones**

Logistical and emotional support for patients and/or caregivers/loved ones from social workers, licensed counselors, chaplains, and volunteers

**Weakness/ Fatigue**

Teach energy management techniques; discuss patient's wishes to identify most important tasks/goals; provide hospice aide support for activities of daily living

**Shortness of breath**

Non-pain symptom management with medications and non-pharmacological techniques, educate family for support

**Infections**

Frequent assessment by nurse for proactive symptom management, antibiotics/other interventions to reduce infection duration, infection control education for family

Contact \_\_\_\_\_  
for more information or to make a referral.