Prognosis Before Planning

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Disclosures

Leonard Hock, DO, CMD, MACOI, FAAHPM

Hock Talk, Quality Decision Making

No disclosures

561 714-1531

hockleonardr@gmail.com

Assumptions

- This is a common occurrence in PALTC
- Everyone of you have dealt with this issue
- And everyone of you have wondered how to best handle this delicate issue
- You have experienced the “Pre-Hospice SNF failure” What were the hospital discharge planners thinking.

Questions

- What percent of LTC residents have Living Wills?
- What percent of the Public believe CPR brings you back to life?
- What is the difference in ROSC and Recovery?
- What is the CPT code for Advance Care Planning?
- Can a facility be found at fault if Full Code or DNR wishes of resident are not responded to?

Answers

- 65% have some Advance Directives
- 75% of the Public believe CPR is life restoring
- Return of Spontaneous Circulation in hospital, 39% but half of those died before discharge.
- CPT 99497
- Yes, the facility can be penalized

How Did We Get Here?

- 1878 CPR could provide some circulation
- 1950s a time of Medical Tech advances
  - Heart monitors, ventilators, defibrillators
- Bethany Medical Center in Kansas City, KS
- Code Blue became the default
- So, today we opt out of CPR

Responses to the DNR Question

- Is it time?
- Are you just giving up on her?
- Leave it up to God.
- There will be a miracle.
- She prefers to be alive.
- None of that DNR stuff.
- She doesn’t get as much care if she is DNR.

Code Blue Today?

- DNR or Full Code
- DNRO
- DNAR
- AND
- DNI
- DNH
- A la cart menu, no pressors, try it for a while

Facts About CPR in LTC

- Older residents have lower success rates
- Chronic disease worsens chance of recovery
- 75% of those resuscitated said they would not want CPR in the future.
- Many changed their mind about CPR (26% in ICU)

DNR, Living Wills, Advance Directives

- DNR
  - Is it current?
  - Is it correct?
- Living wills, Advance Directives, Trust documents
  - DNR, CPR
  - DNI, artificial hydration, nutrition, dialysis, chemo etc.
  - Do documents reflect the “Now” of wishes?

Do You Know Something We Don’t?

- Yes
- Experience and clinical assessment
- C.A.R.I.N.G. criteria
- Palliative Performance Score
- ECOG
- Common sense

C. A.R.I.N.G. criteria

- C. Cancer, stage iv
- A. Admissions to ER or hospital
- R. Resident of Nursing Home
- I. ICU admission within the past 30 days
- N. Non cancer hospice patient
- G. Guidelines
  - Over 80 matters

Palliative Performance Scale

LH0

Level	Ambulation	Dz Activity	Self Care	Intake	Conscious
100%	Full	Normal activity, work	Full	Normal	Full
90%	Full	Normal with some dz	Full	Normal	Full
80%	Full	Activity with effort	Full	Normal/less	Full
70%	Reduced	Unable	Full	Normal/less	Full
60%	Reduced	Unable	Help needed	Normal/less	Full/perplexed
50%	Sit/lie	Dz exhaustion	Help Required	Normal/less	Full/perplexed
40%	Mostly Bed	Extensive Disease	Major Assist	Normal/less	Dull/confused
30%	Bed bound	Extensive Disease	Total Care	Normal/less	Dull/confused
20%	Bed bound	Extensive Disease	Total Care	Minimal/sips	Dull/confused
10%	Bed bound	Extensive Disease	Total Care	Mouth care	Coma/confused
0%	Death				

ECOG

- Eastern Cooperative Oncology Group
- 0. No symptoms
- 1. With symptoms but up and around
- 2. Ambulatory but weak, independent ADLs
- 3. Symptomatic, bed or chair bound, ? ADLs
- 4. Bedbound, total care
- 5. Death

What Can We Do?

- Affirm and Validate without optimism
  - Lovely lady and family
  - Let’s see what we can do together
- Defeat Denial
  - Ask, don’t tell
  - Residents calendar of decline
- Substituted Judgment
  - What would resident want, not what would you want

What to Document?

- Advance Care Planning
- Reflects current condition and wishes
- Family, surrogate, guardian endorsement
- Make it known
  - Red dot or blue dot
- All shifts awareness

What to Bill?

- ACP, Advance Care Planning
  - Face to face with resident or surrogate
  - Condition, prognosis, options of care going forward
- 99497
  - 30 minutes or majority of 30 minutes (16 minutes)
  - Up to 3 times a year
- 99498
  - Additional 30 minutes or majority of time (46 minutes)

Questions, Comments

Thank you

References

- CDC, Use of Advance Directives in LTC Populations, #54, 2011
- Resuscitation, 2015, May: 90:73-8
- Chest. 2014 Nov, 146 (5): 1214-1225
- Age and Aging, Vol 43, Issue 4, July 2014
- American College of Cardiology, Jan 25, 2021, Syed Tanveer
- Caring for the Ages, Aug/Sept 2024, Dear Dr. Diane
- Journal of Pain and Symptom Management, CARING, Vol 31, 2006
- Palliative Performance Scale