I. PURPOSE: To define the management of patients enrolled in hospice.

II. AUTHORITY: California Health and Safety Code, §1798, §1798.2; §1798.160 and §1798.170; California Code of Regulations, Title 22, §100145 and §100146.

III. POLICY: A. EMS personnel shall evaluate and treat patients enrolled in hospice programs with the goal of enabling them to remain at home and continue their desired treatment plan according to the following procedures.

IV. PROCEDURE:

A. Patient Management:

1. The responding EMS personnel will evaluate the presenting complaint, confirm that the patient is on hospice and identify the current hospice provider.

2. A phone call shall be established between EMS and the on call hospice provider to communicate on scene findings.

3. EMS and Hospice communication will be centered around the following goals;
   a. Identifying a need for the hospice provider to respond to the scene
   b. Identifying EMS interventions or actions which may facilitate patient comfort and prevent transport.
   c. Identifying hospice resources or interventions which may facilitate patient comfort and prevent transport.
d. Identifying the unique cases where transport is necessary for hospital treatment or diagnostics which are required in order to best continue in home treatment. In such cases the hospice provider should be able to confirm that hospice enrollment will not be cancelled as a result of transport to ED.

B. Resources / response:

1. Most often transport can be avoided and comfort optimized utilizing only the initial paramedic response along with follow up from the hospice agency.

2. EMS providers should consult with or request a response from one of the following:
   a. Online medical direction from base hospital physician
   b. Community paramedic response
   c. EMS supervisor response