

Lou received a heart transplant at the age of 30. He is now 64 and found out that one of his valves is failing. Lou had also developed diabetes and recently suffered from Covid-19. He needed to have his valve replaced but was frail due to residual Covid-19 issues in his lungs. The doctors believed that Lou wouldn't survive the surgery; if he did, Lou may not be able to regain enough lung function to come off a ventilator.

Lou's cardiac nurse practitioner met with him and his wife, Barbara. She told them **he wasn't a candidate for the surgery**. Barb asked, "Without the surgery, how long do we have?" The nurse practitioner informed them that no one knows precisely, but **most likely around six months**.

Lou then tried to comfort his wife. He said, "Let's enjoy the time we have and not waste it crying." The Nurse Practitioner said, "I also want you to meet with the hospice team. They can support both of you for all that is to come over the next few months and help you celebrate every day you have left!"

Barb and Lou elected hospice services. Lou lived for ten more months. Eight of those months, he was healthy enough to travel to the beach, mountains and the Grand Canyon.

Lou died peacefully in his sleep with Barb cozied up next to him. When she woke to find he had transitioned from this world, she cried for a moment and then called the hospice.

HOW DO YOU KNOW WHEN IT'S TIME?

- Frequent medication or dosage changes
- Optimally treated with diuretics and vasodilators
- Ejection fraction of 20% or less
- Cachexia, profound weight loss
- Dyspnea at rest or with exertion
- New York Heart Association Heart Failure Classification Class IV

- Abnormal heart rhythms resistant to therapy
- History of cardiac arrest or resuscitation
- Increased use of oxygen
- Weight loss or gain related to heart disease
- Inability to carry on physical activity without shortness of breath or pain

End-Stage Heart Disease



PERSONALIZED HOSPICE CARE

Heart disease or other coronary disease patients who are in the final stages of the disease process may benefit from hospice care.

Hospice care supports your patients in living an alert, painfree life and to live each day as fully as possible.

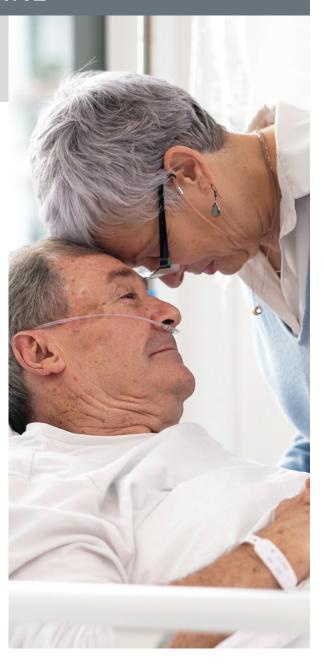
WHEN TO REFER TO HOSPICE CARE

Signs of heart disease progression toward customized hospice care:

- Increase in repeated hospitalizations
- Choose not to follow recommended treatment plan
- Increase in shortness of breath that limits activity
- Decreased alertness or increase in confusion
- Refuse further treatment

CUSTOMIZED SPECIFIC CARE FOR END-STAGE HEART DISEASE NEEDS

- Coordination of Care between multiple medical professionals and family
- Pain management and control
- Reduce shortness of breath through energy conservation techniques
- Emotional support for anxiety and depression
- Family support including decision-making and family communication issues



Did you see a heart disease patient today who we can help? Call Tabitha Hospice and ask for a hospice consultation.