Fred's Hospice Story

Fred struggled with neurological degeneration for nearly 20 years. His doctors were never able to definitively diagnosis his condition.

Fred's son Brian worked hard to provide him with the best health care possible. He spent considerable time and money finding the finest neurologists and nurses in the area.

Fred used to participate in weekly PT, but now he even had trouble getting out of bed and walking on his own, so he spent a lot of time in his wheelchair. During bad spells, he'd be in bed for days at a time, and developed pressure sores. He could no longer dress or feed himself. Meals were mashed or pureed for him.

Brian used to love having late night conversations with his father, chatting about everything from politics to food, or simply what they did that day.

Now, he could barely understand a word his father said. Until recently, he felt he could communicate by reading his father's eyes, but now it was a challenge to understand what Fred wanted or needed.

"This made things especially hard," Brian said. "Along with the emotional aspect of everything going on, I didn't know what was best for my dad and needed a lot of help from our medical staff to understand what I should do and when I should do it."

When Fred's neurologist assessed his condition and gave him a six-month prognosis, he discussed with Brian how hospice care could benefit his father.

"Once dad went into hospice care, it was all about his comfort level. They immediately addressed his pain and stiffness from being so immobile. They helped him swallow and breathe. Now that dad couldn't really speak, it was almost like they were his voice — because they were so good at figuring out what he needed."

How Do You Know When It's Time?

- Frequent visits to ER or hospital admissions
- A decline in ability to perform daily tasks, including eating, getting dressed, walking or using the bathroom
- An increase in falls
- Changes to mental abilities
- Progressive weight loss
- Skin tears, infections and other signs of deteriorating health

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eventide Hospice

Clinical Decline Patients

Personalized Hospice Care

Patients in clinical decline have specific care needs. Eventide Hospice can help.

When to Refer to Hospice Care

These signs and symptoms can show that a person's condition has progressed into a life-limiting illness, where the focus shifts to caring rather than curing:

- Multiple hospitalizations or ER visits
- Frequent or recurring infections
- Loss of urinary or bowel control
- Increased need for medication due to uncontrolled pain or symptoms
- Difficulty swallowing
- Significant, unintentional weight loss
- Disinterest in food and sudden decrease in appetite
- Inability to perform activities of daily living
- Frequent falls
- Shortness of breath while at rest or with exertion
- Sleeping longer and more frequently
- Difficult or decreased communication
- Spending more time confined to a bed or chair
- Change in cognitive ability
- Withdrawal from family, friends and loved ones
- Increased weakness

Customized Specific Care for Clients in Clinical Decline

- Help relieving pain, nausea and side effects from medication
- Specialized treatment of the patient's primary condition and comorbidities
- Education and training for family members on what to expect and how to best assist the ailing family member
- Efforts to ensure dietary needs are met
- Mental health counseling to address depression, anxiety and other issues
- Medical social work assistance
- Optional spiritual and/or religious counseling
- Bereavement counseling to family members

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