

Heart Disease/CHF

The patient has 1 or 2 and 3:

1. Poor response to (or patient's choice is not to pursue) optimal treatment with diuretics, vasodilators and/or angiotensin converting enzyme (ACE) inhibitors

OR

2. The patient has angina pectoris at rest resistant to standard nitrate therapy and is not a candidate for invasive procedures and/or has declined revascularization procedures

AND

3. New York Heart Association (NYHA) Class IV symptoms with both of the following:
 - The presence of significant symptoms of recurrent Congestive Heart Failure (CHF) and/or angina at rest
 - Inability to carry out even minimal physical activity with symptoms of heart failure (dyspnea and/or angina)

Supporting evidence for hospice eligibility:

- Echo demonstrating an ejection fraction of 20% or less
- Treatment-resistant symptomatic dysrhythmias
- History of unexplained or cardiac related syncope
- CVA secondary to cardiac embolism
- History of cardiac arrest or resuscitation

In the absence of one or more of these findings, rapid decline or comorbidities may also support eligibility for hospice care.

*See Appendix 1 for New York Heart Association (NYHA) Functional Classification