Sacred Care Triggers

Choice of care

 ${\cal A}$ ggressive symptom control

Responsive to patient values

Excellent care with hope and dignity

Sacred Care Triggers for Goals Clarification

- 1. Admission in the setting of one or more chronic life-limiting conditions (i.e. Advanced dementia as evidenced by not independent ADLs, recurrent aspiration pneumonia, non healing stage 3-4 pressure ulcers)
- 2. Two or more ICU admissions within the same hospitalization
- 3. Failed or prolonged attempt to wean from the ventilator
- 4. Multi-organ failure defined by two of the following:
 - ☐ Recurrent CHF NYHA Class IV / EF < 20%
 - □ End stage pulmonary disease, O2 dependent with poor functional status / pCO2 >50mmHg; pO2 <55 by ABG
 - ☐ Coma / Anoxic encephalopathy beyond 3 days
 - \Box End stage liver disease / INR > 1.5; alb < 2.5 gm/dl
 - □ Acute renal failure not established on hemodialysis / CrCL <10 cc/min; Cr >8mg/dl
- 5. Consideration of ventilator withdrawal with expected death
- 6. Advanced metastatic cancer with poor functional status
- 7. Consideration of patient transfer to a long term ventilator facility
- 8. Health care provider / family miscommunication or conflict

If the patient has any of the above triggers, the physician may consider Palliative Care or Hospice to assist in evaluating optimum patient plan of care.

Palliative Care pager: 2026. Hospice pager: 1268.