Hospice Glossary of Terms

**Advance care planning**—making plans about the care you would want if you could no longer speak for yourself while you are healthy enough to consider options, make choices and discuss with your family; making a living will and naming a healthcare surrogate are part of advance care planning

**Advance directive**—a document that describes the healthcare you would and would not want if you were seriously ill and unable to speak for yourself

**Anticipatory grief**—mourning the death of a loved one before that person has died, common when the patient is terminally ill

**Bereavement**—grief following the death of a loved one

**Care transition**—a change in a patient’s care, from hospital to home, for example, or from one team of doctors to another, or from curative care to hospice care. Transitions are difficult for the patient and require planning, communication and careful monitoring

**Caregiver burnout**—depression, exhaustion, anger, etc., that stems from feeling alone and unsupported as you care for a loved one

**Case management**—the professional coordination of services to benefit a client; in healthcare facilities, case managers (or case workers) coordinate services for patients transitioning from hospital to other care settings

**Chaplain**—a clergy or lay person employed by a secular organization: a college, military branch, prison, hospice or hospital, police or fire department, etc. A chaplain ministers to those of any religious belief, and of no religious belief

**Continuous care**—one of the four levels of care mandated by the Medicare hospice benefit; up to 24 hours/day of clinical care in the home until symptoms are under control

**Culturally competent care**—the ability to tailor healthcare to meet patients’ diverse values, beliefs, and social, cultural and language needs

**Curative care**—treatments intended to cure a disease

**Diagnosis**—determination of the disease or condition that explains a person’s symptoms

**Difference between hospice and palliative care**—palliative care is the larger umbrella: all care that is intended to comfort the patient, not cure the disease. Hospice care is a sub-category of comfort care reserved for terminally ill patients who do not opt for curative treatment

**DNR**—a do not resuscitate (DNR) order is written by a physician at the request of a terminally ill patient and placed in the patient’s records. It instructs medical staff not to revive the patient if their breathing or heartbeat stops

**Dysphagia**—difficulty swallowing

**Dyspnea**—difficult or labored breathing

**Edema**—an excess of fluid in body cavities or beneath the skin. It causes swelling and is very painful

**Election of hospice**—choosing to be admitted to hospice and signing the necessary paperwork

**End-of-life care**—see hospice care

**Family caregiver**—anyone who provides physical and/or emotional care to an ill or disabled loved one at home

**Four levels of care**—the Medicare hospice benefit mandates that a hospice offer four levels of care to qualify for Medicare reimbursement. Those levels are: routine home care, continuous care, inpatient care and respite care

**Free-standing hospice**—see hospice house

**GIP**—general inpatient (GIP) care, one of the four levels of care mandated by the Medicare hospice benefit; if symptoms are too severe to be managed at home, a hospice patient is cared for in a general inpatient (GIP) bed in a healthcare facility until symptoms are under control

**Grief**—deep sadness experienced after the death of someone you love

**Holistic services**—special treatments (music therapy, massage, pet visits, reiki, acupuncture) that address the whole patient, not just the disease

**Home hospice care**—see routine home care

**Home medical equipment**—supplies and equipment (hospital bed, wheelchair, patient lift equipment, oxygen and its delivery systems, bedside commode) that support the unique needs of a patient at home

**Homelike setting**—a healthcare setting, as in a hospital or nursing home, that emphasizes art on the walls, colorful comforters on the beds and curtains at the windows, for example, rather than the clinical equipment, functionality and sterility of a typical hospital room

**Hospice**—a healthcare organization whose patients are terminally ill, and which focuses on comfort and quality of life rather than on curing the terminal disease

**Hospice aide**—a certified nursing assistant who provides personal or “custodial” care (help with eating, bathing, dressing, moving around, using the bathroom) near the end of life

**Hospice care team**—professional caregivers (RN, physician, social worker, chaplain, hospice aide, bereavement specialist and volunteer) who work together to care for the whole patient near the end of life. See IDT

**Hospice care**—comfort care (as opposed to curative care) that manages pain and symptoms so someone with a terminal illness can live each day to the fullest

**Hospice eligibility**—guidelines that determine if a patient qualifies for the Medicare hospice benefit; two physicians must certify that the patient has fewer than six months to live if the disease follows its usual course

**Hospice house**—a building, usually freestanding, that is designated for the care of patients near the end of life and their families. See inpatient unit

**Hospice volunteers**—members of the community who donate their time and energy to perform tasks for a hospice, from visiting a patient to doing clerical work in the office. Medicare mandates that 5 percent of patient care must be performed by a local volunteer; hospice companies recruit volunteers and provide free training

**IDT**—see interdisciplinary team

**Inpatient care**—one of the four levels of care mandated by the Medicare hospice benefit; around-the-clock care provided in a healthcare facility when the patient’s symptoms cannot be managed at home. The goal is to stabilize the patient so they can return to routine home care

**Inpatient unit**—an area of a healthcare facility, often a floor or wing, dedicated exclusively to the care of patients near the end of life and their families. See hospice house.

**Interdisciplinary team**— a group of professional caregivers with different specialties (social work, spirituality, medical, personal) who work together to care for the whole patient

**Living will**—a document that specifies what kind of medical treatment you would want if you had a terminal illness. It is called a “living” will because it directs what will happen to you while you are alive

**Medicare hospice benefit**—since 1982, Medicare has provided free medical and psycho-social services to anyone who has a doctor’s order stating they have six months or less to live if their disease runs its expected course

**Palliative care**—care that makes a disease or its symptoms less severe or unpleasant without removing the cause; comfort care

**POC**—plan of care; a document created by your hospice team that lists the services you need, the team member who will provide them, how often and what results are expected

**Power of attorney (POA) for healthcare**—a document that identifies who will make healthcare decisions for you if you are unable to speak for yourself due to illness, injury or debilitation

**Primary care physician**—(PCP) the personal physician who cares for you and refers you to specialists as necessary

**PRN**—the direction to take a medication as it is needed

**Prognosis**—the likely course of a disease or illness

**Recertification**—a document that states that a patient who is receiving hospice services continues to be eligible beyond the allotted time of the last certification

**Referral**—the suggestion that a certain patient might be hospice eligible, usually made by a healthcare professional. It can begin an evaluation and discussion that ends in admission to hospice

**Respite care**—one of the four levels of care mandated by the Medicare hospice benefit; caring for a home care hospice patient in an inpatient facility to provide up to five days of respite to the family caregiver

**Routine home care**—one of the four levels of care mandated by the Medicare hospice benefit; basic hospice services brought to the patient wherever they live

**Terminally ill**—having a disease or illness that cannot be cured, and that is expected to result in death in a short time

**Veterans benefits**—advantages or payments available to military veterans through the US government