



Hospice, The Right Choice?



If you or a loved one is not sure that it is the right time to start thinking about Hospice care, please take the following “True or False Questionnaire” to help determine if the Hospice Benefit is the right choice.

1. You or your loved one(s) contact your physician more frequently:
 True False
2. You or your loved one(s) have reoccurring infections:
 True False
3. You or your loved one(s) have fallen several times within the last six months:
 True False
4. You or your loved one(s) have been hospitalized or have visited the emergency room several times in the past six months:
 True False
5. You or your loved one(s) are taking medication to try and relieve pain and symptoms:
 True False
6. You or your loved one(s) sit in bed for the majority of the time and often become short of breath:
 True False
7. You or your loved one(s) need assistance with at least two of the following:
• Getting in/out of bed • Dressing • Walking • Bathing • Eating • Speaking
 True False
8. You or your loved one(s) have experienced noticeable weight loss and fatigue:
 True False
9. You or your loved one(s) have been diagnosed with a terminal illness or received information from a physician that life expectancy is limited:
 True False
10. You or your loved one(s) have loss of bowel or bladder functions:
 True False

Results:

If you answered “**True**” to at least half of the questions above, Hospice might be the answer you’re looking for. This questionnaire is not intended to influence your decision to elect hospice services. Please contact a physician or one of our Heart to Heart Hospice locations for additional information regarding Hospice care and services.