

## Dispelling Myths About Hospice

### **Myth – Hospice is just a place to send people when they are dying.**

Hospice is not a place, but a way of caring for people and their families who are facing their final six months or so of life. Hospice helps them remain as comfortable, functional and dignified as possible, providing physical, emotional and spiritual support. With the support of the hospice team, most people are able to remain in their own homes, surrounded by the people and things they love.

### **Myth – Choosing hospice is giving up**

Hospice affirms life and helps people live as fully and comfortably as possible when cure is no longer possible. It is a way to realistically and humanely manage the final stage of life and an opportunity to redefine and experience hope and healing.

### **Myth – Hospice is only for those who are near death**

Hospice accepts those people who are in their final six months of life, allowing time for support, education, to allay fears and live fully the remainder of their days.

### **Myth – Once hospice is chosen, the person is no longer in control of their care.**

The terminally ill person and their family remain in control of their care. The job of hospice is to support them in a way that respects their value and goals. The person always has the right to change their mind about the selection of hospice care, the provider of hospice care, and may choose to cancel hospice at any time should they again seek aggressive curative treatment.

### **Myth – Hospice is the same as euthanasia**

Hospice neither hastens death nor prolongs dying. The honor both life and the natural process of dying, assuring as much comfort and function as possible within the limits of the disease.

### **Myth – Hospice care is expensive**

Under Medicare and most insurance companies, hospice care is covered 100%, relieving families of many financial burdens. Covered services include nursing visits, social workers, bereavement counselors, spiritual counselors, home health aides, volunteers, physical and speech therapy, all working under the direction of your physician. Medication and equipment and many personal supplies necessary for the comfort and safety are also covered and delivered to your home, as well as short-term inpatient stays for symptom management of respite. No one is refused because of their inability to pay.

Hospice frequent visits, comprehensive support and 24-hour availability helps the person avoid costly and unnecessary hospitalization and trips to the ER.

### **Myth – Hospice is just for people who have cancer**

Hospice cares for anyone facing a terminal disease or natural end of their lives. This includes old age, dementia, heart and lung disease, neurological disorders, and more.

### **Myth – Hospice stops all medications and treatments**

Hospice is very aggressive in providing excellent comfort care. This includes medication, oxygen and other treatments necessary to enhance quality of life. They will work with your physician to determine the best possible plan of care to assure your comfort.

### **Myth – Hospice is depressing**

While it is always sad to realize someone you care about is facing the end of their life, hospice helps that person and family discover ways to create meaning, find healing, share stories and leave a legacy and make the most of the days and months that remain. This is life affirming and can be as filled with laughter as it can with tears. Hospice is a guide for the journey to lessen fear and promote communication and quality of life.

### **Did you know this about hospice?**

- Services are available 24 hours a day, 7 days a week with intermittent visits by the hospice team.
- Your doctor remains in charge of your care unless you choose otherwise or if he or she feels you

will get the best care with a physician who specializes in comfort care.

- The majority of people are able to remain in their own homes until death.
- Two studies show that people actually live longer under hospice care due to good symptom control and decreased aggressive treatment that may occasionally hasten the end of life.
- A number of people improve so much under the hospice team's ability to manage symptoms that they are discharged because the doctor feels they are no longer in a terminal phase (the last six months)
- Your right to choose never ends. You can: \* decide to try curative treatment again and sign out of hospice. If you get better, we are thrilled for you. If treatment fails, the person is welcomed back to resume hospice support and care. \*You can change hospice programs if one isn't meeting your needs.
- No one has a crystal ball. A six month prognosis is our best educated guess based on your disease. Hospice will continue to provide care after 6 months as long as your health status and goals still meet criteria for care.



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