

Hospice Item Set (HIS)

HIS Measures	Explanation
Treatment Preferences	CPR Preference Other Life-sustaining Treatment Preferences Hospitalization Preference
Belief Value	Spiritual/Existential Concerns
Pain Screening	Was the patient screened for pain? The patient's pain severity Type of standardized pain tool used
Pain Assessment	Was a comprehensive pain assessment done? Comprehensive pain assessment includes at least 5 of 7 pain assessment elements (location, severity, character, duration, frequency, what relieves/worsens pain, effect on function or quality of life)
Dyspnea Screen	Was the patient screened for shortness of breath?
Dyspnea Treatment	Was the treatment for shortness of breath initiated? Types of treatment (just check at least one treatment – opioids, other medication, oxygen or non-medication)
Opioid Bowel Regimen	Was a scheduled opioid initiated or continued? If answer to above no, then was a PRN opioid initiated or continued? Was a bowel regimen initiated or continued?

HIS Measures	Answer to Meet HIS Measure
1. Treatment Preferences	
CPR Preference	Yes, patient was asked about CPR preference
Other Life-Sustaining Treatment Preferences	Yes, patient was asked about life-sustaining treatment preference
Hospitalization Preference	Yes, patient was asked about hospitalization preference
2. Belief Value	
Spiritual/Existential Concerns	Yes, the patient was asked about spiritual/existential concerns
3. Pain Screening	
Was the patient screened for pain?	Yes
The patient's pain severity	None, Mild, Moderate or Severe
Type of standardized pain tool used	Numeric, Verbal, Visual, or Staff observation
4. Pain Assessment	
Was a comprehensive pain assessment done?	Yes
Comprehensive assessment included (must have at least 5 of 7 pain assessment elements)	Location
	Severity
	Character
	Duration
	Frequency
	What relieves/worsens pain
	Effect on function or quality of life
5. Dyspnea Screen	
Was the patient screened for shortness of breath?	Yes
6. Dyspnea Treatment	
Was treatment for shortness of breath initiated?	Imitated or declined
Types of treatment (must check at least one treatment)	Opioids
	Other medication
	Oxygen
	Non-medication
7. Opioid Bowel Regimen	
Was a scheduled opioid initiated or continued?	Yes or no
If answer to above no, then was a PRN opioid initiated or continued?	Yes or no
Was a bowel regimen initiated or continued?	If yes to either of above questions, then the answer should be yes or no, but there is documentation of why a bowel regimen was not initiated or continued