



HOSPICE *and* PALLIATIVE CARE
of GREENSBORO

Common Myths about Hospice Care*

Myth # 1: People who become hospice patients die sooner. So people should delay becoming hospice patients for as long as possible.

Mythbuster: Hospice care is focused on comfort. It is not designed to hasten death or to prolong life. A recent medical study showed that some people live **longer** with hospice care. When someone's disease has progressed to the point where no medical treatments can change the course of disease, then receiving the supportive care of hospice improves daily living and may extend life.

Myth # 2: Hospice is only for people with cancer.

Mythbuster: Hospice cares for anyone who is sick enough to qualify for hospice for any reason. We care for people with heart disease, lung disease, Alzheimer's and other brain diseases, HIV, liver diseases, kidney diseases, or "failure to thrive". Sometimes we don't understand why some people get sicker and die, but they can still get care from hospice.

Myth # 3: Hospice is only for people who are very close to death. If people are walking around it is too early for hospice.

Mythbuster: Hospice care is beneficial to people who are still well but who will eventually get sicker. While they are "well", people can finish important unfinished business, fulfill personal wishes, share important time with loved ones all with the assistance of hospice physicians, nurses, social workers, chaplains, nurse aides and volunteers. In short, patients can make the most of the time they have. They also have time to prepare for the future when they get sicker and plan for how they want to die.

**Hospice Care is a universally-applied, generic, term referring to end-of-life care provided by a licensed hospice provider.*

Thanks to you, in Greensboro hospice care means HPCG.

Myth # 4: Hospice takes away people’s ability to receive treatments that may help them.

Mythbuster: As long as a treatment can help someone be more comfortable or treat symptoms, that treatment can be provided. By the time someone is referred to hospice, treatments designed to cure disease or to extend life have no chance of working and may in fact be harmful. So hospice patients are not “giving up” treatments that can accomplish these goals.

Myth # 5: People can’t be admitted to the hospital if they are hospice patients.

Mythbuster: Hospice patients can be admitted to a hospital if that is the best place for them to receive the care they need.

Myth # 6: My doctor will no longer be my doctor if I become a hospice patient.

Mythbuster: As long as he/she is willing, your doctor will remain your doctor and will become part of the hospice team caring for you. Hospice medical directors (physicians who work for a hospice) can also care for you if your doctor is unable to do so.

Myth # 7: Hospice care is expensive.

Mythbuster: For the patient and family, hospice care costs less than usual care. Most services are reimbursed by Medicare, Medicaid and private insurance.

Myth # 8: A doctor has to be the person to call hospice to refer a patient.

Mythbuster: Anyone can call hospice and make a referral – even the patient or a family member. We will contact the physician, make a home visit and gather the information needed to determine if it is the right time for someone to receive hospice care.



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