

Phase of palliative care code N

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Phase of palliative care code N

Identifying and definitional attributes

Metadata item type:	Value Domain
METEOR identifier:	287955
Registration status:	Health , Recorded 13/05/2008
Definition:	A code set representing stage of illness/situation in terms of four recognised phases of palliative care.

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Stable
	2	Unstable
	3	Deteriorating
	4	Terminal

Collection and usage attributes

Guide for use:**CODE 1 Stable phase**

The patient's symptoms are adequately controlled by established management. Further interventions to maintain symptom control and quality of life have been planned.

The situation of the carer(s)/family/friends is relatively stable and no new issues are apparent. Any needs are met by the established plan of care.

CODE 2 Unstable phase

The patient experiences the development of a new problem or a rapid increase in the severity of existing problems, either of which require an urgent change in management or emergency treatment.

The carer(s)/family/friends experience a sudden change in their situation requiring urgent intervention by members of the multidisciplinary team.

CODE 3 Deteriorating phase

The patient experiences a gradual worsening of existing symptoms or the development of new but expected problems. These require the application of specific plans of care and regular review but not urgent or emergency treatment.

The carer(s)/family/friends experience gradually worsening distress and other difficulties, including social and practical difficulties, as a result of the illness of the patient. This requires a planned support program and counselling is necessary.

CODE 4 Terminal care phase

Death is likely in a matter of days and no acute intervention is planned or required. The typical features of a person in this phase may include the following:

- Profoundly weak
- Essentially bed bound
- Drowsy for extended periods
- Disorientated for time and has a severely limited attention span
- Increasingly disinterested in food and drink
- Finding it difficult to swallow medication
- This requires the use of frequent, usually daily, interventions aimed at physical, emotional and spiritual issues.

The carer(s)/family/friends recognise that death is imminent and care is focussed on emotional and spiritual issues as a prelude to bereavement.

Comments:

There is a fifth phase, the bereavement phase, that is usually included as one of the recognised phases of care. As the bereavement phase applies to the period after the person with the life-limiting illness has died, this phase is not relevant to current agreed data collections.

Source and reference attributes

Submitting organisation:

Palliative Care Intergovernmental Forum

Origin:

Eagar K et al (1997) The Australian National Sub-Acute and Non-Acute Patient (AN-SNAP) Casemix Classification: report of the National Sub-Acute and Non-Acute Casemix Classification Study. Centre for Health Service Development, University of Wollongong.

Relational attributes

**Data elements
implementing this value
domain:**

[Episode of community based palliative care—phase of care, code N](#)
[Health](#), Recorded 13/05/2008