

COMMUNITY HOSPICE *self-assessment*

This self-assessment can help you decide if the time is right to talk to your family and physician about Community Hospice care and support ... for you or a loved one.

Lately, I need assistance:

- Getting out of bed.
- Walking.
- Preparing meals.
- Eating.
- Getting dressed.
- Taking a shower or bath.

How many statements apply to your situation?

- I've become weaker and more fatigued.
- I'm becoming short of breath, even at rest.
- I've lost weight.
- I've fallen several times in recent months.
- I've been hospitalized or needed emergency care several times in the past year.
- The pain medications I take are not working as well as they used to.
- I spend a good part of my day lying in bed or just sitting.
- I am experiencing swelling.
- I am on oxygen most of the time.
- I am calling my doctor more often than I used to.
- My doctor has said that my life expectancy is limited.

If you are experiencing four or more of these situations, you could benefit from our wide array of programs and services.

Don't hesitate to contact us if you have questions — 904.407.6500.