

# Identifying patients in need of palliative care: RADPAC

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## A tool for early identification of patients in need of palliative care:

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|--|--|
| <b>Chronic Obstructive Pulmonary Disease</b> | <ol style="list-style-type: none"> <li>Moderately disabled; dependent. Requires considerable assistance and frequent care (Karnofsky-score <math>\leq</math> 50%)</li> <li>Substantial weight loss (<math>\pm</math>10% loss of bodyweight in six months)</li> <li>Presence of congestive heart failure</li> <li>Orthopnoe</li> <li>Patient gives signals of approaching end of life</li> <li>Objective signs of serious dyspnoea (decreased dyspnoea d' effort, dyspnoea with speaking, use of respiratory assistant muscles and orthopnoe)</li> </ol>  |
| <b>Congestive Heart Failure</b>              | <ol style="list-style-type: none"> <li>Severe heart failure (NYHA IV)</li> <li>Frequent hospital admissions (&gt;3 per year)</li> <li>Frequent exacerbation of severe heart failure (&gt;3 per year)</li> <li>Moderately disabled; dependent. Requires considerable assistance and frequent care (Karnofsky-score <math>\leq</math> 50%)</li> <li>Increase in weight which does not react on raising the amount of diuretics</li> <li>General deterioration in clinical situation (oedema, orthopnoe, nycturie, dyspnoea)</li> <li>Patient gives signals of approaching end of life</li> </ol> |
| <b>Cancer</b>                                | <ol style="list-style-type: none"> <li>Worse prognosis primary tumour</li> <li>Moderately disabled; dependent. Requires considerable assistance and frequent care (Karnofsky-score <math>\leq</math> 50%)</li> <li>Progressive decline in physical functioning</li> <li>Progressive bedridden</li> <li>Diminished food intake</li> <li>Progressive losing weight</li> <li>Anorexie-cachexie syndrome (lack of appetite, general weakness, emaciating, muscular atrophy)</li> <li>Diminished 'drive to live'</li> </ol>   |

## Structured proactive palliative care planning:

|   |               |   |               |
|---|---------------|---|---------------|
| <b>Somatic</b>                                | <b>Policy</b> | <b>Social context and finances</b>          | <b>Policy</b> |
| Actual problems:                              |               | Actual problems:                            |               |
| Expected problems:                            |               | Expected problems:                          |               |
| Dying scenario:                               |               | Dying scenario:                             |               |
| <b>Caregiving and daily living activities</b> | <b>Policy</b> | <b>Existential and psychological issues</b> | <b>Policy</b> |
| Actual problems:                              |               | Actual problems:                            |               |
| Expected problems:                            |               | Expected problems:                          |               |
| Dying scenario:                               |               | Dying scenario:                             |               |

### More information

Thoosen B, Engels Y, van Rijswijk E, Verhagen S, van Weel C, Groot M, Vissers K. Early identification of palliative care patients in general practice: development of Radboud indicators for palliative care needs (RADPAC). Br J Gen Pract 2012;62:e625-31.

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