

General Inpatient (GIP) Guidelines



General Inpatient Care (GIP) is a hospice level of care, defined as short-term care provided for a patient's pain management or acute or chronic symptom control that cannot be managed in other settings. By law, hospice must certify that patients meet requirements for this level of care based on Medicare guidelines. This care can be provided in a variety of settings, including a hospital or Hospice & Community Care's Inpatient Center.

When is GIP Appropriate

- Pain or symptom crisis not managed by changes in treatment in the current setting or that requires frequent medication adjustments and monitoring
- Multiple medication adjustments over the previous 24 hrs that has not yet shown to be sustainable
- Intractable nausea/vomiting
- Unmanageable respiratory distress
- Unmanaged delirium, agitation, restlessness
- Imminent death – only if pain or other symptoms are present and acute care is needed
- Accelerated seizures
- Frequent suctioning/high ostomy outputs requiring frequent nursing interventions
- Complex medication regimen not safely managed in another setting (keeping in mind that SubQ alone is not a justification for GIP)
- Observation after head trauma*
- Advanced open wounds with associated symptoms that require skilled monitoring and adjustments*
- Education to family on a case-by-case basis when intensive skilled nursing is required*
- Other unmanaged symptoms (Please consult Hospice & Community Care at 877-506-1049 to review)

When is GIP Not Appropriate

- Automatic level of care when a patient is imminently dying
- To address unsafe living conditions in the home
- Caregiver respite

General Inpatient Center Considerations

- Patient must be a Do Not Resuscitate (DNR)
- Patients who are an elopement and/or suicide risk may not be appropriate

Questions?

Call Hospice & Community Care at
877-506-1049

* These require case by case review and lengths of stay at the center typically occur over 1–2 days.