Physician uses all available information to evaluate for:
- Terminal prognosis of 6 months or less
- Terminal and related diagnoses that contribute to the terminal prognosis
- Symptoms caused or exacerbated by terminal diagnosis, related diagnosis or treatment of terminal and related diagnoses

Note: Determining relatedness is a continuous process by the hospice physician which takes into account the changes in the patient’s condition.

Identify the **PRINCIPAL (TERMINAL) HOSPICE DIAGNOSIS**

Are there other diagnoses caused by or exacerbated by the **PRINCIPAL HOSPICE DIAGNOSIS**?

- Yes
  - The physician narrative statement and the clinical record is the appropriate documentation location for the certifying physician to reference the principal hospice diagnosis, related diagnoses, patient prognosis, and eligibility.

- No
  - Are there additional **DIAGNOSES or SYMPTOMS** that contribute to the 6 month or less prognosis?
    - Yes
      - Related
    - No
      - Are there additional **DIAGNOSES, CONDITIONS, or SYMPTOMS** caused or exacerbated by treatment of the **RELATED CONDITIONS**?
        - Yes
          - Related
        - No
          - Not Related

**NOTE:**
- The decision about relatedness is determined by the hospice physician and is **individualized** based on the patient’s clinical status. (patient-by-patient, case-by-case)
- Decisions about relatedness change as the patient’s condition changes.
- Clinical examples related to this process flow are included in the “Determining Relatedness in Hospice” resource.

*The following are used as equivalent terms:*
- terminal hospice diagnosis = principal hospice diagnosis = primary terminal diagnosis = primary hospice condition