



# Common Myths About Hospice



Choosing hospice care can be a difficult decision and there are many misconceptions about the service. As a result, many who need quality pain and symptom control, along with social and emotional care, do not take advantage of hospice. AuthoraCare Collective wants you to have the facts so you can make the best decision for you and your loved one.

**Myth: Families/patients must wait for their physician to suggest hospice care.**

Fact: AuthoraCare Collective encourages people to be advocates and explore all of their healthcare choices. Anyone may call our Referral Center at 336.621.7575. A referral specialist will answer your questions and make suggestions. AuthoraCare will contact the patient's physician for referral orders if appropriate.

**Myth: Hospice should be called only in the last moments of life.**

Fact: The earlier hospice is used, the more benefit patients and families get from the care. Pain and symptom management is more effective when delivered earlier in the disease process. Families often tell AuthoraCare they wish they had called hospice sooner.

**Myth: A patient must sign a DNR to use hospice.**

Fact: You do not have to sign a Do Not Resuscitate (DNR) order to receive hospice care. While many hospice patients sign a DNR, this choice is not right for everyone. Patients and their families are involved in all decisions and their wishes are always honored.

**Myth: Hospice is only for the dying patient.**

Fact: AuthoraCare focuses on the grieving family as much as the patient. We have a team of professionals who help with grief management and a variety of other services that benefit the patient's loved ones before and after a loss.

**Myth: My doctor will no longer be my doctor if I become a hospice patient.**

Fact: As long as he/she is willing, your doctor will remain your doctor and will become part of the AuthoraCare Hospice team caring for you. Our staff physicians can also care for you if your doctor is unable to do so.

**Myth: Hospice is only for cancer patients.**

Fact: Any patient with an end stage diagnosis can benefit from hospice. Examples include HIV, kidney disease, heart disease and Alzheimer's.

**Myth: Hospice is expensive.**

Fact: Hospice is a Medicare benefit; most private insurance and Medicaid will also cover services. In addition, medical equipment and prescriptions related to the life-limiting condition are covered under these benefits, easing the financial burden on patients and their families. Thanks to generous community support, no one is turned away from AuthoraCare because of inability to pay.

**Myth: Hospice care is only provided in private homes.**

Fact: While many patients who live alone, or with family, receive care in their homes, hospice services are available wherever the patient calls “home.” That means AuthoraCare provides hospice care in independent living, assisted-living communities, skilled nursing facilities and our inpatient hospice facilities, The Hospice Home in Burlington and Beacon Place in Greensboro.

**Myth: Hospice is about dying.**

Fact: Hospice is about living. When pain and symptoms are managed properly, patients make the most of the time they have left . They are able to spend time with friends and family in the comfort of their home while being in control of the care they are receiving. Choosing hospice does not mean the patient is giving up hope or that death is coming soon. Patients often improve and are discharged from hospice.

**Myth: All hospices are the same.**

Fact: While the federal regulations governing hospice programs require the same standard services, that does not mean they are all the same. AuthoraCare Collective is a nonprofit organization whose founding organizations have been in the community for more than 30 years.



*a life well-lived*



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