

FACESHEET W/CORRECT DEMOGRAPHICS

- Address
- Phone
- Emergency Contact Phone
- PCP or following MD

- ALL HOME HEALTH ORDERS NEED ANTICIPATED START OF CARE

DOCUMENTATION

- H&P
- Most recent consults, if any (2 days is fine)
- Operative Report if applicable
- Order specifying RN, PT, OT, MSW, etc.. with Anticipated Start of Care
- CM Assessment
- Social Worker Assessment if seen by social worker during stay
- Advance Directives/POLST, if available
- Medications/Oxygen needs
- Most recent weight
- Discharge Summary
- Depart Instructions/Transfer of Care Summary

OTHER SPECIALIZED SERVICES:

IV ANTIBIOTICS

- Infusion pharmacy providing
- Following ID, if any
- Antibiotic order w/times & end date
- Expected date for home health to start
- Central line report (PICC line, midline, Port)
- Must have a teachable Caregiver who will learn to administer the IV

TUBE FEEDING/TPN

- Company providing supplies
- Dietitian/Nutrition Assessment/Note
- TPN order
- Order w/feeding type, bolus or continuous, & water flush

WOUND CARE including VAC/OSTOMY

- Company supplying wound vac
- If wound vac, the pressure requirements
- Specific order regarding the type of dressing change, vac, and ostomy.
- If MD wants an enterostomal nurse, that needs to be specified in the order

FOLEY OR SUPRAPUBIC CATHETER

- Specific order saying "foley catheter care" or "suprapubic catheter care" noting if home health is expected to monitor and change. For suprapubic, will MD change in office or home health change (please include F/C size)
- Order to include change schedule and flush orders.

PALLIATIVE CARE

- Palliative Care Assessment /Notes from hospital
- Needs Palliative Care Order