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Hospital Discharge Checklist



Discharge day is usually much more pleasant than admission day, especially for the patient. But, it can be a bit stressful for the caregiver if you have to make arrangements for your loved one. The list on the next two pages will help you keep things organized. Even if you don't need to make special arrangements, you will find some things on this list that you should do each time, and that are easily forgotten without it. Again, there are blank spaces for you to personalize it for your needs.

Checklist of things to do when being discharged...

Note: *If special arrangements are needed, like home health services and equipment or transfer to a temporary facility, start here (if not go to the next page):*

- ❑ Find out as soon as possible who the Social Worker or Care Coordinator/Manager is. (Titles vary in different hospitals.) Start working with them early in the process to set up **home health services**. I recommend starting early because otherwise, you might get a phone call the morning of discharge that the Care Coordinator has set everything up with their standard agency without consulting you. Keep in mind that by law, you have the right to choose any company you want. Also, keep in mind that in most cases, home care must be set up before the patient leaves the hospital or some medical plans won't pay.
 - If using a **new agency**, get a contact name and number before leaving the hospital.
 - If you want to use a **previous company**, give the Social Worker the name of the company and any aides or therapists you want back (or don't want back).
 - **In either case**, find out when the company will start: this week, over the weekend, or next week.
- ❑ If your loved one is **coming home and needs special medical equipment**, like a hospital bed, make sure it will be delivered the day before, or morning of your loved one's discharge. You don't want to be surprised that it can't be delivered once they are home.
- ❑ If going to a **SNF (pronounced "sniff" -- Skilled Nursing Care) or rehab**, don't just take the first place the case worker tells you about. Go check it out and make sure you're comfortable. In fact, without leaving your house you can go to the Internet and check out the government survey of nursing home deficiency report. ☎ Because of the way insurance companies pay for hospital stays, hospitals want to get patients out as soon as they see it's possible. Therefore, caseworkers, many times, will pressure you to go to the first place they know is available. Don't be pressured by the case worker's time constraints to go to an unsuitable place for your loved one. A day or two is not unreasonable to make sure that the next several weeks are pleasant for everyone. (See the chapter on Checking Out a Rehab.)

Note: Even after research, sometimes a facility or agency isn't working. It is your right to change any of the service companies at any time.

Checklist of things to do when being discharged (continued)...

- ❑ **Take all personal belongings.**
- ❑ **Understand the medication and prescription list before leaving.** Some discharge nurses will make sure you understand everything; others only see the job as running through the list and having you sign off on it. If you don't understand, it's your job to make sure the nurse slows down and explains it to you. And ask questions if you see medications or doses that weren't there before.
- ❑ **Check the new list against the list you brought with you.** If you see medications that are no longer on the list, find out if your loved one is supposed to go back on it when he/she gets home, or if s/he should no longer takes the old medication. (See Hint #1)
- ❑ **Make sure that the prescriptions match the discharge list.** Sometimes, someone other than the attending physician writes the prescriptions from the doctor's orders. I have gotten prescriptions for the wrong medications because the Intern didn't correctly read the doctor's orders.
- ❑ Get a **list of medications that still need to be given that day.**
- ❑ **Make sure that the ambulatory status is accurate** The home health company will ask to see the discharge papers... if it says that the patient can bathe themselves, even if they can't, it's likely that visiting nurses will believe what they read.
- ❑ Get a **copy of latest blood work.**
- ❑ Get a copy of the **report of any tests run while in the hospital that your primary doctor might want to see.**
- ❑ **Restart home aides.**
- ❑ **Reschedule cancelled appointments and schedule newly recommended appointments.**
- ❑ When you're home and settled, **update your loved one's list of medication and medical history**, showing this visit to the hospital and the diagnosis.
- ❑ _____



Hint #1: Hospitals sometimes substitute medications because they don't carry the brand the patient uses at home. Then they send the patient home on the new medication when nothing was wrong with the old one. This can be costly if you have a bottle of the old pills at home. So, ask if your loved one can go back on the original medication.