

## CHECKLIST FOR SAFE AND TIMELY DISCHARGES

### ADMISSION DAY

#### Assess during H&P:

- ☐ Mobility: "How do you get around at home? Do you need a cane or walker? Do you feel weaker?"
- ☐ Placement: "What's your living situation like? Do you live with family or have support?"
- ☐ Medication Reconciliation and Adherence (affects discharge meds, especially safety and re-admissions): "Does anyone help you take your medications or do you manage them yourself?"

### DURING HOSPITALIZATION

#### Interprofessional consults as soon as medically appropriate (anticipate DME, facility placement, or otherwise not at baseline):

- |                                                       |                                              |
|-------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> PT/OT                        | <input type="checkbox"/> Wound Care          |
| <input type="checkbox"/> SLP                          | <input type="checkbox"/> Respiratory Therapy |
| <input type="checkbox"/> Dietician/Diabetes Education |                                              |

#### Daily re-evaluation of any pertinent needs:

- |                                                                                                                                                  |                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <u>Outpatient follow-up appts</u> (e.g., PCP, specialty appts, funding needs)                                           | <input type="checkbox"/> <u>Procedures</u> : discussed with patient and orders placed (NPO, hold dvt ppx, INR, plts) |
| <input type="checkbox"/> <u>BM/Urinary Retention/Foley</u>                                                                                       | <input type="checkbox"/> <u>VMT/Sitter/Restraints</u> (d/c if not needed)                                            |
| <input type="checkbox"/> <u>IV meds</u> (d/c if not needed)                                                                                      | <input type="checkbox"/> <u>Outpatient IV ABX</u> : Place IV ABX order and PICC                                      |
| <input type="checkbox"/> <u>Consult notes</u> : place orders based on recommendations (including medical specialties interprofessional services) | <input type="checkbox"/> <u>Home O<sub>2</sub></u> : Evaluation and place order if needed                            |

### DAY OR TWO BEFORE DISCHARGE

#### Review medical needs:

- ☐ Acute medical conditions resolved/stabilized (this is what we're exceptionally good at!)
- ☐ Specialty/Subspecialty medical recommendations (check-in and tell them plan to discharge as courtesy)
- ☐ Vital signs and lab abnormalities
- ☐ Pending procedures (e.g., dialysis, imaging): schedule earlier or in the morning

#### Coordinating with CM/SW and Patient

- ☐ Set patient expectations kindly: "You seem to be getting better and might be ready to discharge in the morning tomorrow if things keep getting better"
- ☐ Double-check interprofessional needs: DME, home health, other supplies
- ☐ Transportation (e.g., family to pick up, bus ticket, cab voucher, transport time to facility)
- ☐ OOH DNR/DNI (if going to facility or transporting by ambulance)

#### Medication reconciliation:

- ☐ Evaluate medication needs: PRN meds, triplicate meds, and chronic meds needing refills
- ☐ Send partial medication reconciliation to pharmacy (to avoid overwhelming pharmacy at peak times and prevent delays; also will find out if a certain medication is not covered by insurance and have time to prescribe alternative)

### DISCHARGE DAY

- ☐ See patient and evaluate if medically clear for discharge (ask attending if they can see before rounds)
- ☐ Send remaining medications to complete reconciliation
- ☐ Place discharge orders and write discharge summary

## DISCHARGE PROCESS MAP

