

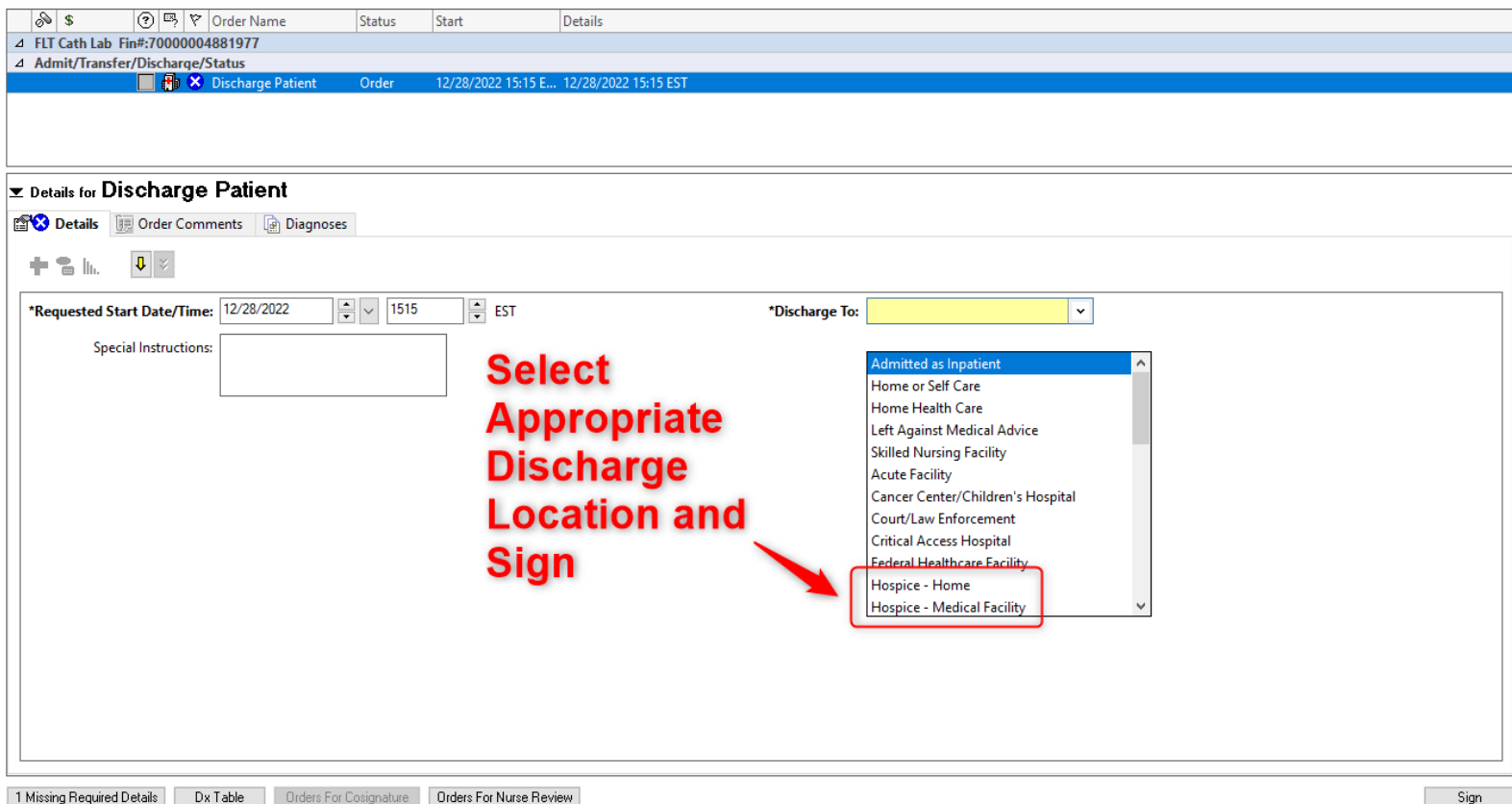
4/4/2023

Inpatient Discharge to Hospice

For Physicians, Advanced Practice Providers, & Residents

Upon patients being transferred to hospice services providers must discharge the patient first from an inpatient status. Patient access will then be notified by the nursing staff and/or clerical staff to create a new encounter hence a new patient FIN in the same room/bed/floor. The provider must order a new 'PSO Admit to Inpatient' to 'Hospice' order in the newly created FIN. New orders for patient care should also be placed during this time. These can easily be found in the 'Hospice Orders' PowerPlan. **The provider should not place a 'Change Accommodation to' order for these types of patients in the existing inpatient status encounter.** Please review the images below for guidance.

In Existing Patient Encounter/FIN:



The screenshot shows the 'Discharge Patient' interface. At the top, there is a table with columns: Order Name, Status, Start, and Details. Below this is a section titled 'Details for Discharge Patient' with tabs for 'Details', 'Order Comments', and 'Diagnoses'. The 'Details' tab is active, showing a form with the following fields:

- *Requested Start Date/Time: 12/28/2022 1515 EST
- *Discharge To: [Dropdown Menu]
- Special Instructions: [Text Area]

The dropdown menu for '*Discharge To' is open, showing the following options:

- Admitted as Inpatient
- Home or Self Care
- Home Health Care
- Left Against Medical Advice
- Skilled Nursing Facility
- Acute Facility
- Cancer Center/Children's Hospital
- Court/Law Enforcement
- Critical Access Hospital
- Federal Healthcare Facility
- Hospice - Home
- Hospice - Medical Facility

A red arrow points to the 'Hospice - Home' and 'Hospice - Medical Facility' options, which are highlighted with a red box. A red text overlay reads: **Select Appropriate Discharge Location and Sign**.

At the bottom of the interface, there are buttons for '1 Missing Required Details', 'Dx Table', 'Orders For Cosignature', 'Orders For Nurse Review', and 'Sign'.

In New Patient Encounter/FIN:

Add to Phase Check Alerts Comments Start: Duration:

Component	Status	Dose ...	Details
PSO Patient Status Order (Planned Pending)			
Admit/Transfer/Discharge/Status			
Please select one of the PSO orders below for accurate patient processing and charging.			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PSO Admit to Inpatient FLT	T,N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PSO Place in Observation	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PSO Outpatient in a Bed FLT	
For Extended Recovery, you need to select BOTH the Extended Recovery order below AND an order for Outpatient in a Bed.			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Extended Recovery	RN to document Extended Recovery stop time when patient is either discharged or upgraded to observation/inpatient status.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PSO Outpatient in a Bed FLT	

Details for PSO Admit to Inpatient FLT

Details Order Comments Offset Details Diagnoses

*Telemetry: Yes No
 *Accommodation:
 *Attending Physician:

Requested Start Date/Time: EST

*Medical Service:

*Admitting Physician:

Special Instructions:

Emergency Medicine
 Endo and GI
 ENT
 Hematology
 Hospice
 Infectious Disease
 Medicine - General
 Neurology
 Newborn
 Observation
 Obstetrics
 Oncology

Select Appropriate Medical Service and Complete Required Fields to Initiate Now and Sign

Search: Advanced Options Type:

Hospice Orders
 Consult to Hospice
 Change Level of Care to Hospice Services
 Enter to Search

Search within:

Orders Medication List Document In Plan

Hospice Orders (Planned Pending)

Component	Status	Dose ...	Details
Hospice Orders (Planned Pending)			
Patient Care			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Vital Signs	May check vital signs at family request if fever evident
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Start Peripheral IV	
Diet/Nutrition			
Only ONE diet should be ordered/active on a patient at a time.			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nutrition to Manage	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	NPO	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advance Diet as Tolerated	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Diet Regular	
Continuous Infusions			
IV Solutions			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sodium Chloride 0.9%	500 mL IV Infusion 20 mL/hr
Medications			
PROVIDER: If patient is not being readmitted as a Hospice Patient, please Review/Complete Transfer Med Reconciliation - Discontinue Any Medications Not Needed			
Pain/Dyspnea Management			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	morphine	2 mg, IV Push, Injection, Q1H, PRN pain, breakthrough for breakthrough pain or dyspnea
<input type="checkbox"/>	<input checked="" type="checkbox"/>	morphine	10 mg, Oral, Soln, Q2H, PRN pain, breakthrough