

Discharge to Home from CCTC Checklist

Please refer to the Discharge to Home Assessment Sheet for details.

- The attending service agrees to discharge to home.
- The attending service has written a note to support discharge.
- Patient has appropriate home support.
- Family/driver notified.
- The need for follow-up appointments has been reviewed and made as follows:

With the attending service:

Date: _____ Time: _____

Location: _____ Physician: _____

With the consulting service:

Date: _____ Time: _____

Location: _____ Physician: _____

With the consulting service:

Date: _____ Time: _____

Location: _____ Physician: _____

With the consulting service:

Date: _____ Time: _____

Location: _____ Physician: _____

- Prescriptions for new medications given to patient and copy placed in chart.
- Prescription for pain medication provided.
- Reasons for, medication information and follow-up instructions have been given for any new medications.
- Instructions have been given regarding safety and or any treatment needs.
- Instructions have been documented in chart.
- Patient instruction booklets/information given to patient:

-
- Patient's medications reviewed by pharmacist (Monday – Friday).
 - Physiotherapy has cleared the patient for discharge (Monday – Friday).
 - Social work has been notified for any follow-up requirements (Monday – Friday).
 - Dietitian has been notified (Monday – Friday).
 - If patient on dialysis, has nephrology been notified and approved discharge?
 - CCAC has been notified
 - The yellow CCAC discharge sheet has been completed and notes have been included for all referred services including: nursing, physiotherapy, occupational therapy, physiotherapy, dietitian, social work.
 - Notify family physician and fax a copy of discharge summary.