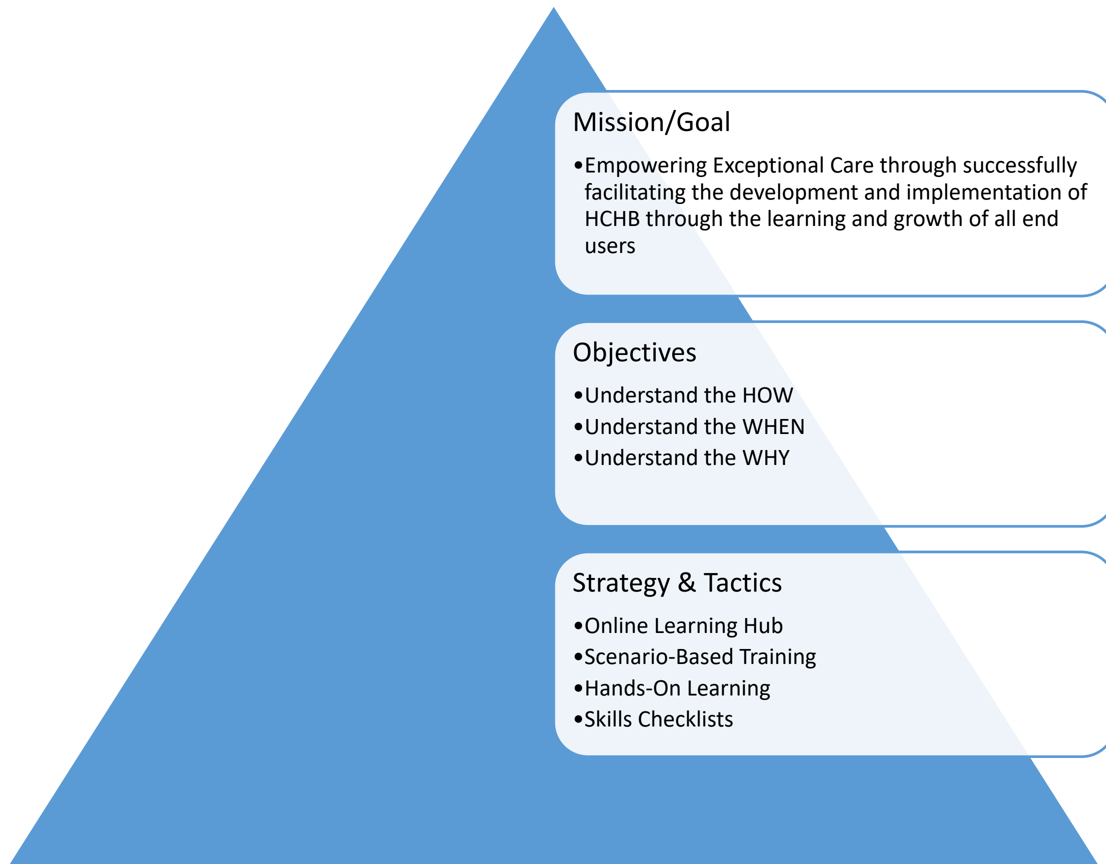
PT Subsequent Visit

Homecare Homebase

PT SUBSEQUENT VISIT

OBJECTIVES OF LEARNING

Your Company and Homecare Homebase are invested in your learning experience. Therefore, it is necessary we follow a set of strategies & tactics to achieve our objectives, which ultimately lead us to our overall goal through Empowering Exceptional Care.



1. **Mission / Goal:** Successfully facilitate the development and implementation of HCHB through the learning and growth of all end users

    1.1. **Objective:** User to understand HOW, WHEN, & WHY in using the system

        1.1.1. The HCHB new user should understand the basic functionality of the PointCare application upon completion of the Online Learning Hub curriculum.

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1.1.2. The HCHB new user will be able to document against the desired Therapy Goals and Status and identify progress toward each goal by the end of this course.

1.1.3. The HCHB new user should understand where to identify the key components that determine discharge and how to write the discharge order for their discipline by the end of this course.

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AGENDA ITEMS

Agenda Item	Time
Introduction • Who is my patient? • How do I start my day?	15 min
Visit Actions • Unexpected Events / Therapy Reassessment Warning • Mileage / Drive Time • Vital Signs • Physical Assessment • New Order • Interventions / Goals • Therapy Assess / Plan • Therapy Goals / Status	45 min
PRN • Client Complaint	10 min
Notes Agency Specific Note(s)?	5 min

COMPLETE YOUR VISIT

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PATIENT CASE STUDY

ASSESSMENT AND PLAN OF CURRENT VISIT

Vitals:

HISTORY OF PRESENT ILLNESS

Patient is a woman being admitted for home care due to St. II Pressure Ulcer to left heel and need for wound management. Patient has past medical history significant for type 2 diabetes, hypertension, and nicotine dependence. According to patient's husband, John Smith (contact), she has exhibited no cognitive issues or functional deficits prior to this episode of care. The patient has been noted to have a good appetite and denies problems with sleeping or weight changes. She also denies any suicidal ideations and visual/auditory issues.

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Temperature	98.8
Respirations	20
Pulse	75
BP	160 / 95

General: *Patient is awake, alert, and oriented to person, place, and time (AAOx3) with periods of confusion. Overall, patient is exhibiting signs of improvement in all areas.*

Cardiopulmonary: *Patient's lungs are diminished, but clear, and patient does not have a cough.*

Gastrointestinal: *Patient has no nausea, vomiting, or constipation.*

Functional: *Patient is homebound due to generalized weakness and a decline in function related to disease process. Patient also uses walker for ambulation and is at risk of falls. Patient uses walker boot to lower left extremity. Patient experienced a fall yesterday while husband, John, was at home. Patient will continue with designed plan of care in addition to sitting in wheelchair and attempting to practice sit to stand. We will perform another fall risk assessment in this visit. Patient is actively cuing for posture, breath control and tech. Patient stands 4 times for approximately 10-20 seconds each time with maximum assistance of 2. Patient is anxious about falling. We will instruct caregiver to get patient in wheelchair and take her outside the home for a short time to improve mood. We will have patient practice sitting balance activities. Patient is exhibiting rapid improvement.*

Complaint: *Patient complains that the Home Health Aide who has been providing care is not giving them enough heads-up time prior to arriving at their home. They would like to have at least 30 minutes heads-up.*

RECOMMENDATIONS FROM CASE CONFERENCE

Patient is improving and meeting her goals, so we should adjust the Plan of Care accordingly. We need to discharge from PT services next week.

THERAPY GOALS/STATUS

Functional (PT)		
Transfers (PT)	***Status***	***Carryover***
Bed to Chair	*Minimally Independent*	*Y*
Toilet	*Standby Assist*	*Y*

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Gait (Deviations)	Status	Carryover
Narrow Base of Support	*Minimal Dysfunction*	*Y*
Decreased Knee Extension	*Minimal Dysfunction*	*Y*
No Heel Strike	*WNL*	*N*
Unsteady / Unsafe	*Moderate Dysfunction*	*Y*
Poor / Inconsistent Placement of Assistive Device	*Moderate Dysfunction*	*Y*
Gait (Distance/Assistance)	***Status***	***Carryover***
Level Surface Distance (in feet)	*8*	*Y*
Musculoskeletal (PT)		
Strength (PT)	***Status***	***Carryover***
Right Hip External Rotation	*3/Fair*	*Y*
Left Hip External Rotation	*3/Fair*	*Y*
Right Knee Flexion	*3/Fair*	*Y*
Left Knee Flexion	*3/Fair*	*Y*
Right Knee Extension	*3/Fair*	*Y*
Left Knee Extension	*3/Fair*	*Y*

COORDINATION NOTES

REQUEST TO ADD NEW PHYSICIAN

DEMOGRAPHIC CHANGE REQUEST

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NOTES & QUESTIONS

Helpful Hint – Our Quick Reference Guides are available from any computer or tablet via the Online Learning Hub website using your internet browser at:

https://www.hchb-olh.com/page/resources

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