



ACUTE CARE TRANSFER DOCUMENT CHECKLIST

RESIDENT NAME _____

COPIES SENT WITH RESIDENT (Check all that apply):

These documents should ALWAYS accompany patient:

- Resident Transfer Form
- Face Sheet
- Current Medication List or Current MAR
- Advance Directives
- Care limiting Orders
- Out of hospital DNR
- Bed hold policy

Send these documents IF INDICATED:

- SBAR/Nurse's Progress Note
- Most Recent History & Physical and any recent hospital discharge summary
- Recent MD/NP/PA Orders related to Acute Condition
- Relevant Lab Results
- Relevant X-Rays

PERSONAL BELONGINGS SENT WITH RESIDENT:

- Eyeglasses Hearing Aid Dental Appliance
- Other (specify)

Signature of ambulance staff accepting envelope: _____

(Please make a copy and keep this for your records in the nursing home)