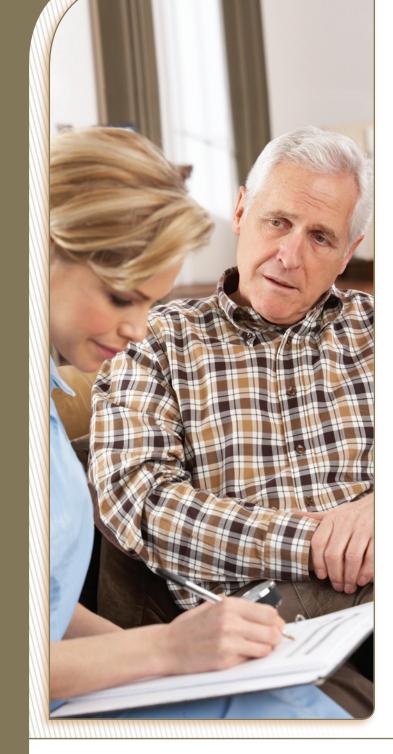
		ADMIT DATE				
		DISCHARGE DATE				
B133	RECA	PITULATION OF PATIENT'S HOSPITALIZATION				
		Rationale for admission				
		Synopsis of accomplishments as reflected through treatment plan				
		Baseline of psychiatric, physical and social functioning at time of discharge				
	•	Evidence of patient/family response to treatment				
	•	Indicates extent to which goals in treatment plan have been met				
B134	SHOULD DESCRIBE THE SERVICES AND SUPPORTS APPROPRIATE TO THE PATIENT'S NEEDS EFFECTIVE THE DAY OF DISCHARGE					
		Description of follow-up services				
	•	Plan for psychiatric, medical treatment and medication regimen				
	-	Appointment date and name and address of service providers				
		Community housing/living arrangement, economic/financial status or plan				
	-	Recreational/leisure resources				
		Involvement of family/significant others				
B135	PATIE	ENT'S CONDITION ON DISCHARGE				
	-	Anticipated problems and suggested means of intervention				
	-	Status of patient on discharge				
				-		_



DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Medicare & Medicaid Services







INPATIENT PSYCHIATRIC FACILITIES (IPF)

IPFs, which are classified as psychiatric hospitals or psychiatric units, provide the patient with acute psychiatric treatment that can be reasonably expected to improve his or her condition.

Discharge Planning

When "you" is used in this chart, we are referring to IPFs.

The IPF discharge planning process considers:

- The discharge alternatives addressed in the psychosocial and behavioral health assessment; and
- The extent to which the goals in the treatment plan have been met.

The patient and all relevant professionals in each service caring for the patient should participate in this process.

The discharge planning process should address anticipated problems after discharge and suggested means for intervention, including:

- Accessibility and availability of community resources and support systems, including transportation;
- Accessibility and availability of medications and counseling by a pharmacist; and
- Special needs related to the patient's functional ability to participate in aftercare planning.



INPATIENT PSYCHIATRIC FACILITIES (IPF) (continued)

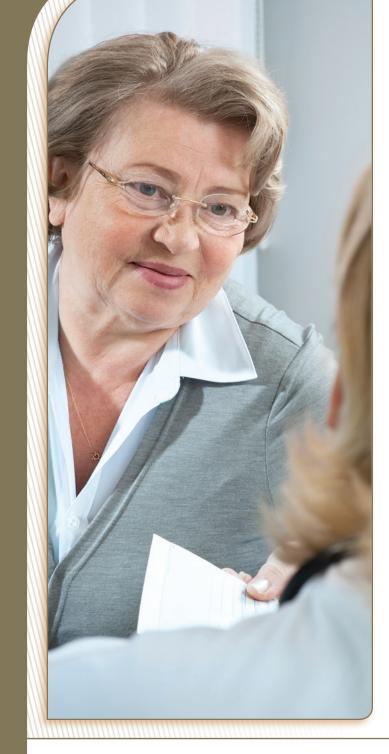
Discharge Summary

You should complete the IPF discharge summary within a reasonable timeframe and provide:

- A recapitulation of the patient's hospitalization which includes a summary of the patient's stay, including symptoms, treatments, and pain management;
- A summary of the patient's condition on discharge. This summary will be available for release to authorized individuals and agencies, with the consent of the patient or the patient's legal representative;
- A summary of medication therapy changes and instructions; and
- Recommendations for appropriate services for follow-up or aftercare.

The discharge summary must include:

- The reasons for the patient's admission to the IPF;
- Nursing and health care providers' notes (such as social workers);
- A plan that outlines psychiatric, medical, and physical treatment and medication therapy management, as applicable;
- A list of medication modifications and patient instructions;



INPATIENT PSYCHIATRIC FACILITIES (IPF) (continued)

Discharge Summary

- Documentation that the patient received electroconvulsive therapy, if such treatment was provided;
- Whether the patient was in seclusion or physically restrained:
- Evidence of the patient's and family's response to treatment interventions;
- Health care providers' discharge summaries (such as nurse practitioners or physicians);
- Documentation that a complete history and physical examination, medication reconciliation, and psychosocial evaluation were performed at discharge;
- Discharge disposition (such as outpatient follow-up services and arrangements with treatment and other community resources to provide follow-up services, including prior verbal and written communication and exchange of information with such resources);
- The extent to which the patient achieved treatment goals during hospitalization;
- A baseline of the physical, psychosocial, and behavioral functioning of the patient at discharge; and
- Appropriate services and resources, including medication counseling, which will be effective on the day of discharge.

You must document the discharge summary in the patient's clinical record.