



Adirondack Health Institute

Lead Empower Innovate

Discharge Checklist - Adults

Have you held a Discharge meeting with Member and members of the team? Yes No N/A

Reason for "No" or "N/A"
Plan for Completion

Have you written a Discharge Note in GSI for the Member? Yes No

Reason for "No"
Plan for Completion

Have you closed out all goals on the Plan of Care in GSI and shared with the Member? Yes No

Reason for "No"
Plan for Completion

Have you created a Discharge Summary for the Member? Yes No

Reason for "No"
Plan for Completion

Have you mailed, or given the Discharge Summary to the Member? Yes No

Reason for "No"
Plan for Completion

Is the DOH 5058 Health Home Patient Information Sharing - Withdrawal of Consent Signed Yes No N/A

Reason for "No" or "N/A"
Plan for Completion

Is the DOH 5235 Notice of Determination for Disenrollment signed and sent to Member? Yes No

Reason for "No"
Plan for Completion