

Rehospitalization

CLIENT CARE PLAN

Client: *Pathways , CarePlan

Client ID#:

1165425300

Admission Date:

12-06-2006

41 Health Care Supervision

Potential Problem

Admission Rating	K	B	S
Desired Outcome	K	B	S

Cat.	Target	Care Description Note
S	Medical/Dental Care	Adequate / Appropriate Complete Re-hospitalization / Emergent Care Risk assessment at regular intervals throughout length of stay
CM	Other	Other Add phone follow-up between home visits to: 1) Review Emergent Care Plan 2) Continue client / caregiver education re: disease process 3) Assess status
CM	Other	Other 1) Create client specific Emergent Care Plan 2) Leave copy in home 3) Review with client / caregiver at each visit 4) Coordinate with physician to adjust prescribed visit frequency for appropriate disciplines as needed

Employee Signature _____ Date _____