

Pre-Admission Huddle: Equipment/Special Care Need for Skilled Nursing Facility (SNF) Resident

Resident Name _____

Anticipated SNF Admission Date _____

Respiratory Therapy

- _____ Oxygen concentrator/supplies
- _____ Suction machine
- _____ Mask rebreather
- _____ CPAP/BAP¹ settings needed
- _____ Trilogy/settings needed
- _____ Tracheostomy/supplies
- _____ Nebulizer machine

Wound Care

- _____ Wound VAC² and supplies
- _____ Special order wound dressings
- _____ Date of last dressing change and measurements
- _____ Special mattress/bed
- _____ Other special order items

Infection

- _____ Culture results/note any pending for f/u³
- _____ Isolation room, if needed

Bowel/Bladder

- _____ Foley catheter _____ Check diagnosis and need
- _____ Suprapubic catheter
- _____ Colostomy _____ Ileostomy
- _____ Rectal tube
- _____ PEG-tube or J-tube⁴

Orthopedic

- _____ CPM⁵ machine
- _____ Ortho brace _____
- _____ Special appliance _____

Medication Management

- _____ Current medication list/diagnosis/comorbidities
- _____ Pain management (prescriptions sent)
- _____ Start and stop dates for short-term medications
- _____ Psychotropic (prescriptions sent)

Bariatric Equipment

- _____ Bed _____ Chair _____ BSC⁶

Fall Management

- _____ Number of falls in hospital
- _____ Sitter _____ Alarm
- _____ Other equipment _____
- _____ Restraint/type _____
- _____ Behavior _____

IV/TPN⁷

- _____ Kangaroo pump
- _____ IV pump
- _____ PICC line⁸
- _____ Date inserted _____
- _____ Measurement _____
- _____ Central line
- _____ Date of insertion _____

Comment/special needs identified

_____	Date checklist completed
_____	Date of preadmission huddle

1. Continuous positive airway pressure (CPAP)/ bilevel PAP (BPAP)
2. Vacuum assisted closure (VAC)
3. Follow up (f/u)
4. Percutaneous endoscopic gastronomy (PEG)-tube or jejunostomy (J)-tube

5. Continuous passive motion (CPM)
6. Bedside commode (BSC)
7. Intravenous (IV)/total parenteral nutrition (TPN)
8. Peripherally inserted central line catheter (PICC)