

MEDICARE MEETING SUMMARY DOCUMENTATION FORM

DATE:

Resident name	admit date	Dx	Prior Level	PT fxn	PT current level	OT Fxn	OT current level	ST	DC Goals	FAT Scores	DC Barriers	DC Plans
				sit-> lying		feeding		Cog:				
				lying ->sit		oral hygiene		Diet:				
				sit -> stand		toilet hygiene		loss from mouth	Y	N		
				bed<-> chair		toilet transfer		holding food	Y	N		
				walk 50' 2 turns		dressing		cough/choke	Y	N		
				gait dist/assist		bathing		difficulty swallow	Y	N		
				sit-> lying		feeding		Cog:				
				lying ->sit		oral hygiene		Diet:				
				sit -> stand		toilet hygiene		loss from mouth	Y	N		
				bed<-> chair		toilet transfer		holding food	Y	N		
				walk 50' 2 turns		dressing		cough/choke	Y	N		
				gait dist/assist		bathing		difficulty swallow	Y	N		
				sit-> lying		feeding		Cog:				
				lying ->sit		oral hygiene		Diet:				
				sit -> stand		toilet hygiene		loss from mouth	Y	N		
				bed<-> chair		toilet transfer		holding food	Y	N		
				walk 50' 2 turns		dressing		cough/choke	Y	N		
				gait dist/assist		bathing		difficulty swallow	Y	N		
				sit-> lying		feeding		Cog:				
				lying ->sit		oral hygiene		Diet:				
				sit -> stand		toilet hygiene		loss from mouth	Y	N		
				bed<-> chair		toilet transfer		holding food	Y	N		
				walk 50' 2 turns		dressing		cough/choke	Y	N		
				gait dist/assist		bathing		difficulty swallow	Y	N		

Assist levels:

- Dependent    Substantial / Max Assist    Partial / Mod Assist    Supervision / Touching Assist    Set-up Assist    Independent  
 Refused    Not Applicable    Not attempted due to environmental conditions    Not attempted due to medical condition/safety concerns