

## FACE-TO-FACE TRANSITIONAL CARE VISIT DOCUMENTATION

*For use in plan section of visit note.*

### Medication reconciliation:

- Medication list updated
- New medication list given to patient/family/caregiver

### Referrals:

- None needed
- Referrals made to: \_\_\_\_\_  
\_\_\_\_\_

### Community resources identified for patient/family:

- None needed
- Home health agency
- Assisted living
- Hospice
- Support group
- Education program: \_\_\_\_\_

### Durable medical equipment ordered:

- None needed
- DME ordered: \_\_\_\_\_

### Additional communication delivered or planned:

- Family/caregiver: \_\_\_\_\_
- Specialists: \_\_\_\_\_
- Other: \_\_\_\_\_

### Patient education:

Topics discussed: \_\_\_\_\_  
\_\_\_\_\_

Handouts given: \_\_\_\_\_  
\_\_\_\_\_

Initial transitional care contact was made on  
\_\_\_\_/\_\_\_\_/\_\_\_\_ (see separate note)