

Passport to Transport

* Use pencil

Transport Mode: Bed: ___ Bari Bed: ___ WC: ___ Bari WC: ___ Stretcher: ___ Other: _____

Activity: _____

Isolation: _____

Lines:
 AV FISTULA ___
 VAS CATH ___
 NGT/OGT ___
 FOLEY ___
 CVC ___
 PICC ___

O2:
 Yes ___
 No ___

Fall risk:
 Red ___
 Yellow ___
 Green ___

Monitor:
 Yes ___
 No ___

Neuro:
 Alert ___
 Oriented ___
 Confused ___
 Lethargic ___
 Deaf ___
 Blind ___

IV:
 Yes ___
 No ___

Code Status:
 Full ___
 No code ___ (see chart)

Allergies: _____

Important info: _____

Date:	Procedure:	Initials:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pt ID Stamper

Patient Identification Number (PIN) Program Protecting Your Privacy

Your privacy is very important to us. At the same time, we want to make sure your experience at McLaren Flint is a positive one, and we realize how important family and loved ones are during any hospital stay.

We have established the Patient Identification Number (PIN) Program to help manage our commitment to your privacy; along with your family and loved ones need for information to help in your recovery process.

(cut along dotted line)



The PIN **DOES NOT** allow family members or loved ones access to obtain copies from your medical records. The code is also only valid for this specific admission. **Future admissions require a new PIN.**

If you have any questions regarding the PIN program, please feel free to talk with your nurse.

Below is your visit specific PIN. You may share this number with whomever you wish.

The type of information that will be shared by Nursing staff to individuals providing a correct PIN is the Basic Patient Information. Basic Patient Information is related to your general well being, surgeries/tests/procedures which have been scheduled and completed; and that results/outcomes are available for discussion with your physician.

Our discharge goal is 11:00 a.m. on the day of discharge. Please be sure to let the nurse know who will be picking up your loved one. Be sure to contact the floor nurse if there are any questions or concerns that we may help with. Thank you for choosing McLaren Flint

Due to patient confidentiality, in order for your family to obtain information about your health condition over the phone or in person, the PIN provided below must be communicated to the Nurse, prior to release of any health information. Please make sure anyone that you want to have access to Basic Patient Information has been given this number.

PIN: _____

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PIN: _____

Admission Date: ____/____/____