

McLaren Print System Order

Order No: 7383  
Order Date: 2014-11-29  
User: anna parsian  
Phone: 810-342-2375

Ship Location: Debra Hoffman/Anna  
401 South Ballenger Hwy - 4 South  
Flint , MI 48532

Forms

Quantity: 500  
Paragon Dept No: 91570  
Dept Name: Case Management 4-South  
Company Number: 60

Order Total Price: 59.75

Item Number: 17598  
Item Description: Discharge by Transfer  
Revision Date: 3/2012  
Print: 1 sided black and white  
Paper: 2 Part (White, Yellow)  
Size: 8.5 x 11  
Fold:  
Finish:  
Drill: 5 Hole Top  
Misc Info:

McLAREN FLINT  
FLINT HOSPITAL  
DISCHARGE BY TRANSFER

I. PATIENT INFORMATION (attach corrected face sheet):

Patient admitted to McLaren Flint on (date) \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Transfer \_\_\_\_/\_\_\_\_/\_\_\_\_ From (unit/room) \_\_\_\_\_  
Destination (Hospital, extended care facility, agency, etc.): \_\_\_\_\_

|  |   |
|--|---|
| II. PHYSICIAN ORDERS (Complete and Sign):  |   |
| 1. Diagnosis at the time of transfer:  |   |
| 2. Surgeries (include date):   |   |
| 3. Allergies:  |   |
| 4. Diet:   |   |
| 5. Therapies:    Yes    No                      Yes    No                      Weight bearing Full    Padded    Home    R    L    (circle) |   |
| Physical:  | <input type="checkbox"/> <input type="checkbox"/> Occupational: <input type="checkbox"/> <input type="checkbox"/> |
| Speech:  | <input type="checkbox"/> <input type="checkbox"/> Respiratory: <input type="checkbox"/> <input type="checkbox"/>  |
| 6. Hemodialysis: Site: _____ Schedule: _____ Transportation: _____   |   |
| 7. O <sub>2</sub> needed at: _____   |   |
| 8. Other instructions:   |   |
| 9. Medication (Dose, Route, Frequency): _____ <input type="checkbox"/> Discharge Medication List Attached                                  |   |
| <input type="checkbox"/> McLaren Visiting Nurse S. Hospital to assess home care needs at ECF.  |   |
| Physician's Signature: _____                      Date: ____/____/____                      Time: _____                                    |   |