Care Transition Communication Form Surgical Preparation – Home Safety

	Evaluation only
	Evaluation and HEP follow-up
Equip	oment Recommendations:
	Rolling walker
	Crutches
	Straight cane
	Raised toilet seat
	Tub seat
	Grab bar
	Commode
Home Set-up:	
	Number of stairs (entrance)
	Number of stair (living space)
	Safe stair railings
	Environmental clutter
	Caregiver support
Exercise/Endurance Status:	
	HEP created and executed
	 Duration of HEP pre-op
	No HEP
Conclusion:	
	Home Recovery an option
	Home Recovery may not be best option
	Reason:
	Completed By:
	Contact Phone Number: