Honeywell HomMed Monitor Installation

Patient name: ____________________________

Date & Time of Install: _____________________

Installer: ________________________________

Pre-Installation

_____ Write a Skilled Nursing Frequency on the Plan of care that reflects a Telehealth model of care. (If Applicable)
_____ Notify the Telehealth Case Manager, LifeStream Clinician, or POC Clinician with expected date/time of installation and patient demographics.

Installation

_____ Set-up the monitor in a suitable location
_____ Send a Test message and verify successful transmission
_____ Program the monitor based on the patients needs
_____ Demonstrate monitor to the patient and/or caregiver
_____ Observe the patient using the monitor and transmit a packet of baseline vitals
_____ Review the appropriate sections of the Quick Start Guide with the patient
_____ Review the Informed Consent for Home Telehealth and obtain patient’s signature
_____ Present the Telemonitor Patient Instruction Guide to the patient, and explain the log book section
_____ Report any patient specific circumstances that could affect readings or transmissions

Equipment used/left at patient’s location

_____ Monitor with power source (Serial #_______________)
_____ Scale with cable (Serial #_________________)
_____ BP cuff size (I, II, III, IV circle choice)
_____ SpO2 finger sensor and attachment cable (Serial #_______________)
_____ Phone cord (7ft, 12ft, 15ft, 25ft, other_____ circle choice)
_____ Power supply cord
_____ Power strip
_____ Duplex jack ___Triplex jack ___In-line coupler (note quantity)
_____ GPRS (SIM #_________________________________)
_____ Other: _________________________________________

Peripherals: (Glucometer, PT INR…) ______________________________

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