

Before You Go Home Checklist

Preparing for a safe transition home

You deserve to feel prepared. Review this with your care team.

Check each box together. If something is unclear, ask before you leave.

Patient: _____ Discharge date: _____

1 Understand your care plan

- ☐ I have written instructions in a language I understand.
- ☐ I know my care needs, activity limits, and any food or fluid instructions.
- ☐ My caregiver and I can explain or show the care we will do at home.

2 Review your medicines

- ☐ We reviewed my updated list, including prescriptions and supplements.
- ☐ I know what to start, stop, or change, and when to take each medicine.
- ☐ I have a plan to get my medicines and help with cost or pickup.

3 Confirm services and follow-up

- ☐ I discussed needed services, provider options, and my preferences.
- ☐ If home health is ordered, my agency is confirmed and I know the visit plan.
- ☐ I have follow-up appointments, a ride, and a plan for pending test results.

4 Get ready at home

- ☐ Needed equipment and supplies are arranged; I know how to use them.
- ☐ We have a plan for meals, bathing, walking safely, and help between visits.

5 Know when and whom to call

- ☐ I know my warning signs and when to call my care team or 911.
- ☐ I have daytime and after-hours numbers, and know whom to call if care is delayed.

Keep these details handy

Home health or other care provider / phone: _____

First visit date / time: _____ After-hours phone: _____

Follow-up clinician / date / phone: _____

Use with your care team's instructions. For an emergency, call 911.

ASK MARY ANYTHING

Mary Papion

Patient Advocate

Home Health & Hospice, Mobile Notary, Community Resources, Bilingual English/ Español

AskMaryAnything.com



Call / Text

254-721-2726