<u>Guideline</u>: Admission, Orientation, and Discharge Process for the CR/PR Program

Guideline Number: Cardiopulmonary Rehab 1

Responsible Department: Cardiopulmonary Rehab

Effective date: 3/2025

Scope: University of Toledo Medical Center



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Procedure:

To ensure proper processing for patients that are admitted into and discharged from the program, have proper documentation for patients that are admitted into and discharged from the program, and to provide patients with instructions for the UTMC Cardiopulmonary Rehabilitation Program.

- (A) Patients are admitted into the UTMC Cardiopulmonary Rehab program with a referral from a physician responsible for their care. Once a patient attends a new patient evaluation/in-take visit, they are scheduled for their first exercise session.
 - (1) Upon admission, the chart must have a signed physician referral, signed consent forms and the most recent summary of care documenting their cardiac/PAD/pulmonary diagnosis.
 - (2) They must have the initial history and physical form in the electronic medical record (EMR) completed prior to their first exercise session. Laboratory values and additional records can be added as needed.
 - (3) The patient's demographic information and diagnosis is given to registration for precertification and/or authorization of medical benefits.
- (B) New patient evaluation/in-take visits take place after an appropriate referral for cardiovascular or pulmonary rehabilitation is received. During the evaluation visit, patients are given a description of the components and expectations of cardiovascular and pulmonary rehabilitation. They are given a description of the benefits of attending the program and the following information to review and/or sign/fill out as appropriate:

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- (1) Consent to undergo treatment in the outpatient Cardiopulmonary Rehabilitation program
- (2) Informed consent for research (if applicable)
- (3) Psychosocial Screener
- (4) Dietary Food Screeners
- (5) Quality of Life Survey
- (6) Ambulatory fall risk prevention education
- (7) Exercise guidelines
- (8) Education schedule
- (9) Cardiopulmonary exercise test information sheet (if applicable)
- (10) Patient Parking Guide
- (C) Accommodation for new patient evaluation/in-take visits will be made for patients with special scheduling needs as available by the staff.
- (D) Patients are discharged from the program after completing 36 therapy sessions for Phase II and SET for PAD, which would show compliance to the referral from their physician. Pulmonary Rehab patients are discharged after completing the appropriate number of sessions necessary to get the patient to a maintenance level of functioning as determined by the Medical Director, Cardiopulmonary Rehab staff, and/or referring physician. Patients may also be discharged from the program prior to this for other reasons including returning to work, medical complications, limited insurance coverage, personal preference, non-compliance with therapy, and/or other reasons.
 - (1) The staff will attempt to contact the patient after three (3) missed no-call/no-show appointments by phone. If the staff is unable to contact the patient, a letter of intent to discharge will be sent. If the patient does not respond in a timely fashion, they will be discharged from the program.
 - (2) Phase II and Pulmonary Rehab patients that have not completed the program within 36 weeks will be discharged.
 - (3) PAD patients that have not completed the program within 12 weeks will be discharged unless otherwise noted by their insurance.
 - (4) Once the patient is discharged, the referring physician will be notified, and a summary of their therapy will be sent.

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/s/	

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Date

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