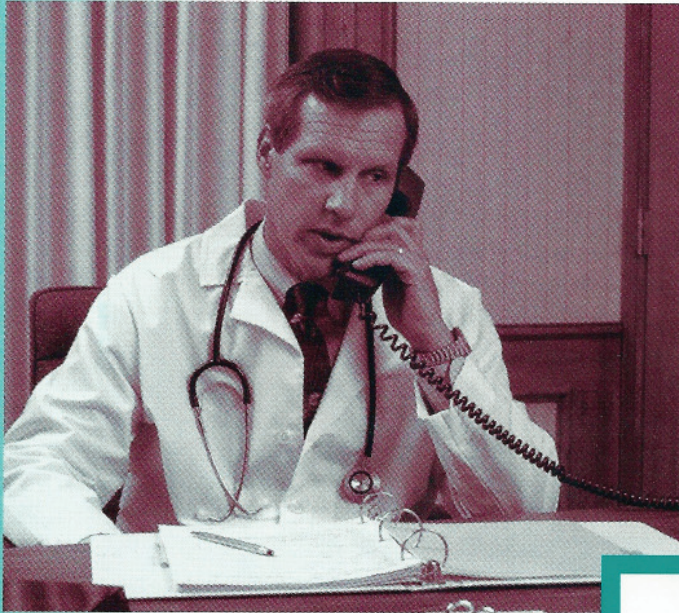


## MAKING HOME HEALTH CARE EASIER FOR THE PHYSICIAN



Each Associated Health Resources affiliate agency operates under a program that makes patient referral and physician-directed home care more convenient for the doctor.

The physicians associated with AHRI praise our agencies for their professionalism and the procedures that make the doctor's job easier.

- **CONVENIENT REFERRAL**

We accommodate the physician's schedule. A doctor can call our offices with a home care patient referral anytime, including evenings and weekends, 24 hours a day, seven days a week.

- **SIMPLE REFERRAL**

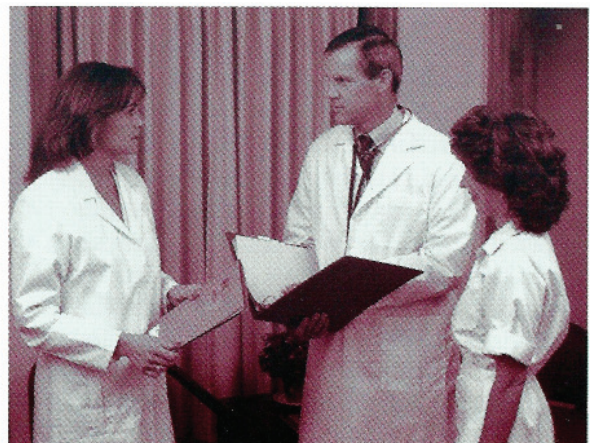
We make it easier for you. We reduce the number of steps and the number of people involved. We handle almost all of the paperwork for you. We reduce your time expenditure required in starting client care.

- **A PROFESSIONAL REFERRAL CONTACT**

When you call an AHRI agency, the admissions representative you speak to is a nurse. Having a nurse handle your referral call facilitates quick and clear communication of all pertinent medical information, saves steps, and saves time.

- **PHYSICIAN CONTROL**

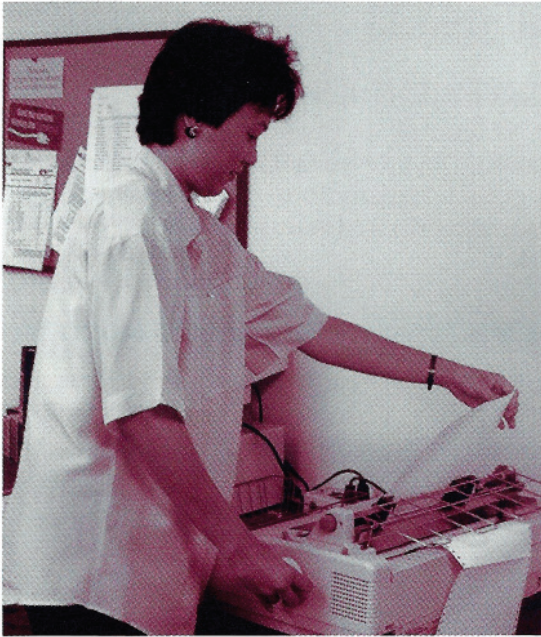
As the patient's doctor, you are in charge. In response to your direction, our agency nurses develop a most thorough Assessment and Treatment Plan for your patient during the admission process.





## • MEDICARE REIMBURSEMENT MANAGEMENT

Each AHRI agency has a comprehensive understanding of Medicare coverage criteria. We handle all Medicare documentation on behalf of our clients. For our client physicians, we streamline the Medicare reimbursement process to reduce physician paperwork. We utilize Medicare benefits to obtain 100% coverage for most of our clients, requiring no out of pocket costs from them.



## • LESS PAPERWORK

The comprehensive Assessment & Treatment Plan, which we initially jointly develop for each client, reduces the need for recurring physician orders. In addition, we reduce physician paperwork by handling all Medicare documentation procedures.

## • ONE R.N. CASE MANAGER

Collin Home Health Care will assign one R.N. Case Manager to work with your patient. The consistency of working with one Case Manager helps build a strong working relationship with the physician and provides continuity of care for the client.

## • PHYSICIAN CONVENIENCE PROCEDURES

At Collin Home Health Care, we tailor our everyday procedures for physician convenience. For example:

### COLLECTIVE PHYSICIAN ORDERS

Our Medical Records Department will periodically mail, fax, or courier physician orders for all of your patients under our care. Our client physicians report that this is much more convenient than receiving an influx of individual orders at random every day.

### "PHYSICIAN FRIENDLY" FORMS

Our agency forms are clear and concise. They are designed to highlight just the specific information needed for a particular client in a clear professional format. Using our form is much easier than dealing with the usual collection of assorted lengthy forms covered with a collage of handwritten post-it-notes.



### LAB WORK RESULTS

Our agency nurses will promptly deliver, fax, or call in lab work results directly to the client physician's office. The physician is always made aware of the client's condition first, which enables more timely treatment adjustment for the client.

## • MORE PHYSICIAN COMMUNICATION

Collin Home Health Care nursing professionals maintain periodic ongoing communication with our client's physicians. Our physicians are updated on their patient's condition and consulted for treatment on a regular and frequent basis.



## PHYSICIAN'S GUIDE INDICATIONS FOR HOME CARE

As an Associated Health Resources agency, we will provide free evaluation visits to assess your patient's needs and determine the appropriateness of home health care.

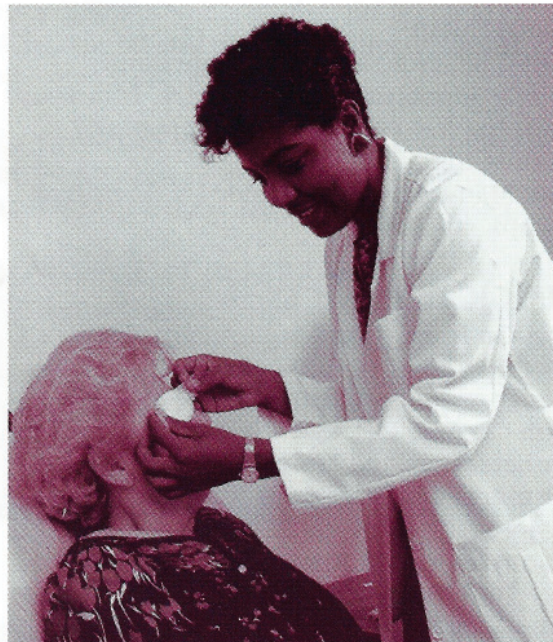
Our free evaluations may be beneficial for your patients requiring:

### OPHTHALMIC SERVICES:

- Pre-Op Management and Teaching
- Post-Op Management, Teaching and Dressing Changes, as indicated
- In-Home Management/Teaching of Visually Impaired Patient

### PULMONARY/THORACIC SERVICES:

- Tracheostomy Care and Instruction to Patient and Family
- Management and Instruction of COPD Patients
- Management and Teaching for Thoracotomy Patients
- Teaching/Care of Laryngectomy Patient
- Oxygen Maintenance (Respiratory Therapist for Blood Gases as ordered by physician)
- Management for Home Ventilator Patient



### ORTHOPEDIC SERVICES:

- Instruct Post-Op Patients on Proper Body Mechanics for Total Hip, Total Knee, Austin Moore Prosthesis and Hip Pinning
- Following P.T. Regime by Physician, or Assist Physical Therapist as needed
- Treatment Modalities such as: Ultra Sound, Massage, and Cold/Heat Applications
- I.V. Infusion Antibiotic Therapies

### INTERNAL MEDICINE SERVICES:

- Monitoring and Teaching of Patients with CHF, Hypertension, CVA, Parkinson's, COPD, Diabetes, etc.
- Post MI Management
- Cardiac Rehab (Individual Nursing Care According to Physician's Orders - Oximeter Readings)
- Teach Medication Management or Established Medication Regime
- Nutritional Instruction Regarding Special Diets
- I.V. Infusion Therapy



### MANAGEMENT OF THE TERMINALLY ILL:

- Chemotherapy/Radiation Therapy Management
- Coping with Death and Dying (Patient and Family Programs)
- Instruction on Principles and Practices of Pain Relief in Terminal Illness Symptoms Management
- "On-Call" Professional Assistance and Family Support at Time of Death. Follow-up visits to offer Psychological Support and Counseling
- Pain Management to include I.V. Morphine Pumps, etc.

### UROLOGICAL SERVICES:

- Post-Op Instruction/Management and Wound Care
- Management and Instruction of Patient with Chronic UTI's
- Catheter Care and Management-Urostomy (Ostomy appliances provided through most major medical insurance plans)
- Management of Patient with G.U. Cancer (See Terminally Ill Category)
- Renal Dialysis (Peritoneal Home Management)



### SURGICAL SERVICES:

- Post-Op Teaching Following Surgery if Patient's Treatment Compliance is Questionable
- Conditions Warranting Nursing Follow-Up Until Complete Stability Achieved
- Wound Management and Dressing Changes
- Colostomy Care and Instruction to Patient and Family
- T-Tube Management and Instruction on Care as Indicated
- Gastro and Jejunostomy Feeding and Instruction of Care
- I.V. Therapy

### GENERAL SERVICES:

- Elderly patients who live alone or exhibit signs and symptoms of malnutrition, dehydration, or possible prescription drug abuse/mismanagement
- Unstable Diabetics
- Patients who need close lab follow-up such as:
  - FBS
  - CBC
  - Protime
  - Blood Chemistries
  - UA
- Patients who are confused and disoriented
- Patients who have difficulty in mobility
- Patients who are permanently disabled or handicapped
- Patients with little or no apparent family support system
- Patients with limited economic resources



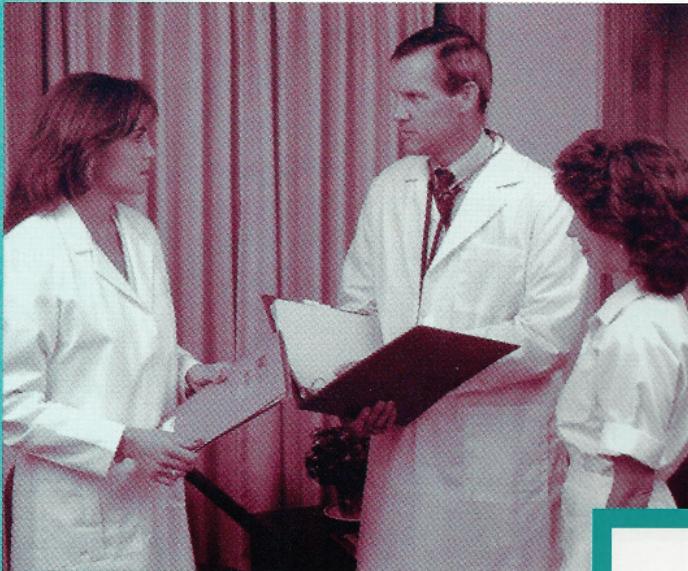
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## BRINGING THE HOSPITALIZED PATIENT HOME FOR CONTINUED CARE



### YOUR HOME TRANSITION PARTNER

Each Associated Health Resources agency serves as a helpful partner to Hospital Discharge Planners and patient physicians when the time comes to send a patient home. We make this transition easier for the patient, the doctor, and the hospital staff.



### WE CONTINUE THE CARE YOU HAVE GIVEN

Our Home Health Coordinators are trained specifically to work with Hospital Discharge Planners and social service departments. The Home Health Coordinator facilitates all of the steps of a transition back home, and assigns an R.N. Case Manager and a Home Health Aide to your patient.

Our professionals continue your patient's care through continued monitoring, continued lab work, treatment, therapy, medication management, and continued reinforcement of post-hospital instructions given by the physician.





## MEDICARE MANAGEMENT

All AHRI affiliated agencies have achieved an unequalled expertise in Medicare standards and procedures. Our nursing professionals meet or exceed the new "Focused Review" criteria from Medicare on the hospital-to-home transition.

In addition, our agencies fully utilize Medicare reimbursement so that most of our clients can enjoy home health care without incurring out of pocket costs.



## SOCIAL SERVICE COORDINATION

Collin Home Health Care coordinates charitable services, if they are needed by our clients. Our Home Care Social Worker assists our clients by arranging for needed supportive services and care.

Each AHRI agency has a commitment to see to it that all clients referred to us are cared for compassionately, and not left to flounder in the "No Care Zone" of the health care industry.



## QUALITY CARE YOU CAN TRUST

At Collin Home Health Care, we know that your concern for your patients continues after they go home. As your partner, we can assure you that your patients will continue to receive the care you have begun. You can feel secure and comfortable in the assurance that your patients have been placed in the hands of home care experts with a professionalism you can trust.

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