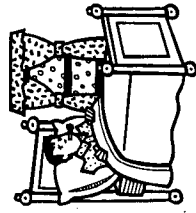


JOHNS HOPKINS HOME CARE GROUP  
PROVIDES THE FOLLOWING SERVICES:

- Skilled Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, Social Work, Respiratory Therapy, Home Health Aides, and Dieticians for Adults and Children.
- Home infusion therapy including antibiotics, antivirals, hydration, TPN, enteral therapy, chemotherapy, biologicals, pain management, blood clotting factor, growth hormone, IVIG, cardiac drugs, heparin therapy and steroids.
- Medical and respiratory equipment and clinical services including: oxygen, CPAP and BiPap, apnea monitoring, ventilators, asthma management, nebulizers and medications, beds, wheelchairs and mobility devices and pediatric equipment.
- Medical supplies including supplies for diabetes, ostomies, incontinence, and wound care.
- Outpatient pharmacy at JH Outpatient, Weinberg and Bayview Medical Centers
- Home-based hospice services for adults and children with life-limiting illness available through affiliation with Community Hospices. Diagnoses include heart disease, genetic disorders, renal disease, dementia, Alzheimer's disease, HIV/AIDS, cancer, etc.



- Home Health Services • Pharmacy
- Pediatrics at Home • Affiliation with Community Hospices

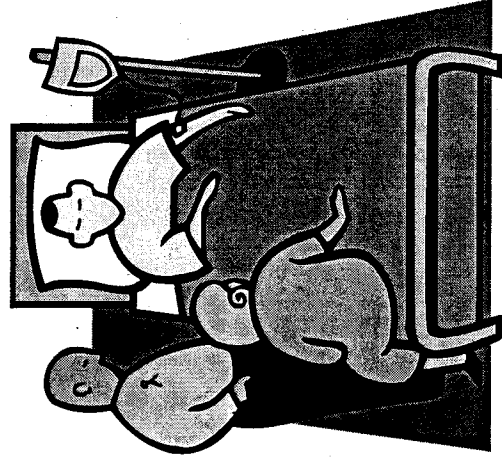
# JOHNS HOPKINS

H O M E C A R E G R O U P

## Expedient Discharges

### Home With

### Home Care



Can do midlines at home?  
lasts a couple of weeks

## CHF

## Facts to Know

**Planning:** Refer early! Communicate potential discharge verbally to the unit Discharge Planner. Ideally at least 24 hours planning allows patients to develop appropriate expectations and the discharge planning team to make appropriate plans. Inform the patient/family also! Prepare to state or write specific home care orders, identify the physician who will follow the patient in home care (receive paperwork and phone calls) and communicate with that MD to coordinate care.

**Prescriptions/Order:** These are required for most home medical equipment and all home parenteral medications. They can be faxed to JHHCG. For oral medications, fax the Rx. to the outpatient pharmacies in advance, to minimize patient wait times, and to enhance medication compliance.

**Payment:** Most health insurances have some home care benefit, including some home visits, durable medical equipment, infusion and supplies. Patient clinical needs must meet payer criteria, and often must be pre-authorized by the payer.

**Medicare:** *Requires patients to be homebound, covers few medications. If no needs other than venipuncture for labs, Medicare will not cover home nursing. Physician must sign prescription, Plan of Care, and/or Certificate of Medical Necessity. Certain Physician Oversight activities for Home Health are billable - ask about our Care Plan Oversight Information.*

**Protocols:** Appropriate orders and care plans are highly individualized based on the patient's condition and needs. These brief case studies will give some examples of how home care can be used. Our Home Care Coordinators will work with you to assess the patient and advise you on the appropriateness of home care and suitable orders.

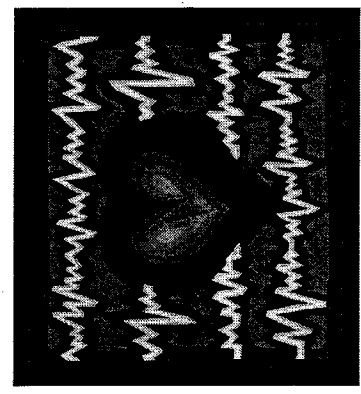
## Nursing:

- Assess weight trends, signs and symptoms of disease/exacerbation, adherence to medications and diet
- Instruct in disease process, self care, including daily weights, sodium restricted diet, signs/symptoms to notify MD, instruct on medications, use, side effects, and Lowmolecular weight heparin injection technique,
- Administer Low molecular weight heparin /Lasix PRN, draw blood for INR, digoxin levels

## • Ionotropic Infusions

## DME/RT:

- Home oxygen, teaching/assessment re: new home oxygen
- Blood Pressure cuff, other Home Medical Equipment, Diabetic Supplies



- Home Health Services
- Pharmacy
- Pediatrics at Home
- Affiliation with Community Hospices

## COPD/Pneumonia

### *Nursing:*

- Assess pulmonary status, signs and symptoms of disease/exacerbation, adherence to medications and diet
- Instruct in disease process, self care, including high calorie diet, medication use, side effects, signs/symptoms to notify MD
- Perform pulse oximetry on each visit; notify MD if <90

### *PT/OT:*

- Instruct in energy conservation
- Establish home exercise program

### *DME/RT:*

- Home oxygen, teaching/assessment re: new home oxygen
- Portable oxygen for transport home can be arranged with 4 hours advance notice

• Medicare: requires: continuous use of oxygen and oxygen saturation of 88% or less on room air

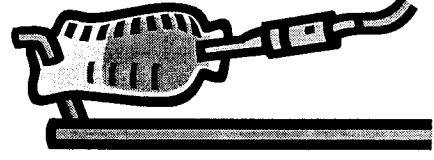
- Home Health Services • Pharmacist
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## IV Antibiotics

### *Home Care Orders:*

- Specify drug/dose/frequency/duration; home care pharmacist can assist with plan
- Note accurate height/weight/allergies
- Note type of access-PICC, groshong, etc. Home IV team often uses and places mid-lines
- Requires 4 hours advance notice in Central Maryland area
- Nursing staff will TEACH the patient/caregiver to self administer, then monitor the patient, change cassettes, draw blood for lab monitoring. Newborn infusions care administered by RN.

• Medicare: does NOT cover antibiotics but does cover some antivirals; secondary insurance often will cover and generally has no homebound requirement



- Home Health Services • Pharmacist
- Pediatrics at Home • Affiliation with Community Hospices

## Home TPN

- Same as IV Antibiotics and:
  - Specify orders/continuous or cycled; home care pharmacist can assist with plan
  - Specify lab orders and frequency
  - Note type of access: long term (tunneled central catheter preferred)
  - Generally requires 24 hour prior notification for appropriate coordination
  - If continuous, will hook up home prescription in hospital prior to discharge
  - Nursing will teach patient to add medications, how to self administer and trouble shoot pump, and signs/symptoms hyper/hypoglycemia, infection, daily weights, then monitor patient weekly for assessment, labs, dressing changes
  - Medicare: requires stringent qualifying criteria
    - Generally for a patient with permanent, severe pathology of the alimentary tract which does not allow absorption of sufficient nutrients to maintain weight and strength commensurate with the patient's general condition.
    - Minimum of 3 mos duration, significant supporting documentation such as diagnostic studies, operative reports, lab results.

## Home Care Summary:

- Home care teaches and empowers patients and their families through information, skills and equipment that allow them to manage their care independently under the direction of their physician.
- The goals of home care are to provide the most appropriate care in the least restrictive setting.
- Skilled home health care is assessment, teaching, and treatments related to new diagnoses or changes in the medical plan of treatment, and care that requires special skills or training.
- Homebound refers to being unable to leave home without considerable difficulty/assistance for medical reasons and Absences from home are infrequent and generally to receive medical care; lack of transportation is not considered. Medicare requires homebound status, other payers do not.
- RN, PT, OT, ST are intermittent services, provided in visits and generally for an acute, not chronic, care need.
- Physician orders and other documentation are payer requirements. Medical equipment requires a Certificate of Medical Necessity. Most equipment and all medications require a prescription.

To make a referral, or for further information or questions, please call the unit assigned Home Care Coordinator or contact us at 410-288-8100, where we can assist you 24 hours daily.

# Johns Hopkins Home Care Group

## Home Care Coordinator Assignments

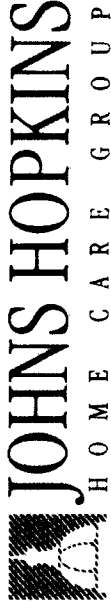
UNIT	Pager # (410) 283-0615 VM - 410-288-8197	Pager # (410) 283-0614 VM - 410-288-8197	Pager # (410) 283-0616 VM - 410-955-5870	Pager # (410) 434-0160 VM - 410-614-3310
<b>HALSTED</b>				
2		★		
3	★			
4	★			
5				
6			★	
7 (SCU)	★			
8	★			
<b>MEYER</b>				
3		★		
4		★		
5		★		
6		★		
7				
8		★	★	
9			★	
<b>NELSON</b>				
3		★		
4		★		
5	★			
6				★
7	★			
8	★			
<b>OWEN</b>				
7		★		
3		★		
4				★
5				★
6				
7 (MCU)				★
8				★

Please page the coordinators Mon. - Fri. 8:30 AM - 5:00 PM. After-hours, weekends, holidays, call Intake - (410) 288-8100. For patient issues, please contact unit coordinator.

**Patient needs? - Contact Home Care Coordinator**

**Unresolved issues - Call HCC Manager @ 410-478-2642**

**Evenings, weekends, holidays - Call 410-288-8100**



JHHCG is jointly owned by Johns Hopkins Health System and Johns Hopkins University.

We provide skilled, intermittent services, medical & respiratory equipment & services and infusion therapy services and supplies that are provided to patients after or in lieu of hospitalization.

**Services:**

> RN, PT, OT, SLP, MSW, > Adult & Pediatric  
HHA Visits, Dietician Home Health

- Observation/assessment vital signs, complications
- Teaching – Wound care, medications, injections
- Medically fragile infant and child early discharges program

> Respiratory & Medical > Home Infusion Therapy:  
Equipment:

- Oxygen • Apnea Monitors • Antibiotics • Steroids
- CPAP • Ventilators • TPN • Biologicals
- BiPap • Wheelchairs and • Enteral • Pain
- Medical Mobility Devices Therapy Management
- Supplies • Hospital Beds • Hydration • Clotting
- Chemotherapy Factor
- Ionotropics • IVIG

*Johns Hopkins Pharmaquip Ambulatory Pharmacies:*

• Sidney Kimmel Comprehensive Cancer Center - 410-955-5747

To speed discharge and delight your patient, fax prescriptions the night before to 410-955-5747. The Pharmaquip managed pharmacy can have them ready for pick-up as the patient leaves the hospital.

• Johns Hopkins Outpatient Center – 410-955-3733

• Home Health Services • Pediatrics At Home • Pharmaquip • Affiliation with Community Hospices