

**HOPEMONT HOSPITAL  
PRE-ADMISSION PROCEDURE**

When applying for admission to Hopemont Hospital, the following information must be submitted before determination is made.

\_\_\_\_\_ APPROVED PAS 2002 AND FINANCIAL FOR NURSING HOME  
(make sure that medications have a diagnosis listed with them on page 3)  
\_\_\_\_\_ LEVEL II (IF NESCESSARY)

\_\_\_\_\_ RECENT HISTORY AND PHYSICAL

\_\_\_\_\_ PPD (IF POSITIVE, HAS PATIENT EVER BEEN TREATED AND  
WHEN?)

\_\_\_\_\_ ONE MONTH'S NURSING NOTES (if applicable)

\_\_\_\_\_ POA OR LEGAL COMMITTEE DOCUMENTS (if applicable)

\_\_\_\_\_ STATEMENT OF COMPETENCY FROM PSYCHIATRIST IF MI,  
(MUST ADDRESS ABILITY TO MAKE FINANCIAL AND MEDICAL  
DECISIONS)

\_\_\_\_\_ RECENT LABWORK (WITHIN 6 MONTHS)

\_\_\_\_\_ CBC (if available)

\_\_\_\_\_ CHEM 6 & 12 (if available)

\_\_\_\_\_ U/A (if available)

\_\_\_\_\_ EKG (if available)

\_\_\_\_\_ CXP- PA & LAT (if available)

\_\_\_\_\_ VDRL (if available)

\_\_\_\_\_ HEPATITIS B SURFACE ANTIGEN (if available)

\_\_\_\_\_ PNEUMONIA VACCINE (IF YES WHEN)

\_\_\_\_\_ TETANUS TOXOID (WHEN?)

\_\_\_\_\_ PSYCHOLOGICAL EVALUATION (if available)

or

\_\_\_\_\_ PSYCHIATRIC EVALUATION (if available)

\_\_\_\_\_ OTHER PERTINENT INFORMATION (if available)