



DOMÉ HOME CARE

Dependable Oxygen & Medical Equipment

Hospital Bed Order Checklist

Please provide the following documentation when ordering a hospital bed:

- + Patient demographic information
- + Face-to-face chart notes documenting need for hospital-bed-level positioning
- + Medical necessity (one must apply):
 - + Medical condition requires positioning not feasible in an ordinary bed (e.g., to alleviate pain, promote respiration, prevent aspiration)
 - + Patient requires head-of-bed elevation more than 30 degrees most of the time due to CHF, COPD, or aspiration risk
 - + Patient requires traction equipment that can only be attached to a hospital bed
- + For semi-electric / full-electric, documentation that patient can operate the controls
- + Patient weight (bariatric bed required if ≥ 350 lb)
- + Hospital Bed Standard Written Order (SWO) required elements:
 - + Patient name
 - + Order date
 - + Bed type (manual / semi-electric / full-electric / bariatric)
 - + Side rails, mattress, accessories (trapeze, over-bed table)
 - + Treating practitioner name or NPI & signature
 - + SWO date must be on or prior to delivery date and on file prior to billing

Disclaimer: Although every reasonable effort is made to present current and accurate information, Dome Home Care makes no guarantees of any kind and cannot be held liable for any outdated or incorrect information.

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