

Heart Failure: Remote Patient Monitoring Enrollment Checklist

I have:

- Ensured the patient meets eligibility criteria and has agreed to be part of the program
- Ensured the referral form is completed and signed
- Ensured the patient has viewed the Honeywell Instructional Video on COWs
- Ensured the patient has signed the informed consent
- Ensured the patient has completed the Minnesota Living with Heart Failure Survey
- Ensured the patient has been given a RPM kit
- Ensured the patient has signed the Equipment Loan Form

The device is meant to monitor symptoms and vitals only. It is **NOT AN EMERGENCY RESPONSE** unit. Patient is directed to call **911** for immediate medical emergencies.

- All original forms are to be kept on the patient's chart.**
- Four documents have been faxed to the RPM Program at 902-620-3267**

Date: (dd/mm/yyyy)

Signature of Provider

Some Heart Failure Points for Discharge:

- ✓ We've been monitoring your vitals including your weight, blood pressure and oxygen levels. The RPM program will be able to continue to monitor you while you're at home
- ✓ Remember to restrict the amount of fluid you take in each day as instructed by your physician
- ✓ Be careful of the amount of sodium/salt in your diet
- ✓ Remember to make an appointment to see you FP or NP for follow-up
- ✓ The RPM Nurse will contact you at home to make sure you get set up okay

If you have any questions call the RPM Nurse at 902-620-3260