

Equipment Check-Out Evaluation:

Guidelines for the usage of this evaluation form are as follows:

1. Basic information is entered as indicated on the form including patient's name, MPI#, division and unit.
2. Treatment Diagnosis: indicate the reason for referral.
3. Major Limitation: indicate the reason equipment is needed.
4. Equipment: note type of equipment ordered/needed. Note also type of walker, cane, etc. and any other pertinent information such as times equipment is to be used.
5. Indicate if:
 - A. Patient is instructed on how to use equipment.
 - B. Equipment was fitted to individual patient usage.
 - C. Patient and/or staff voices/demonstrates understanding on how to use equipment.
 - D. Patient may take equipment to discharge location upon discharge.
6. The evaluating therapist must sign, print their name and title and date the evaluation.