

Your Checklist to Go Home

Discharge Checklist *(To be checked off as education occurs.)*

Topic	Issued Handout(s)	Education Completed
Transfers		
Transportation		
Complications: I know common complications/risks associated with SCI and what to do if I experience these		
Medications		
Bowel Routine		
Bladder Routine		
Medical Supplies: I know what I need after discharge and how I will continue to receive those medical supplies		
Pressure Relief		
Mental Health Resources: how to access		
Return to work/school plan is established		
Vendor Contacts: wheelchair, orthotics, etc.		
Other:		
Other:		
Other:		



Home Readiness: ramp, bath equipment, measurements

Doorways

Entry:

Bedroom:

Bathroom:

Other:

Bathroom

Toilet to shower:

Toilet to counter:

Tub/Shower

Inside width:

Outside width:

Length:

Walk-in Shower

Total width:

Entry width:

Height of threshold:

Shower Entry

Doors / Curtain / Other:

Number of Stairs

Entry #1:

Entry #2:

Inside:

Other: