

Individual QI / QM Series - Chronic Care: Prevalence of falls

(Only includes residents flagging on 1 or more QI/QMs ordered by resident name)

Resident Name	Most Recent Assessment Date		Accidents		Behavioral		Clin	Cogn	Elimination/Continence			Infect	Nutrition		Pain Manag.		Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total			
	AA8a	AA8b	New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr		Little Active	Pressure Ulcer	
Current Residents																														
L10149, F10149	3/19/03	03		ü				ü																					5	
L10159, F10159	3/12/03	03		ü	ü			ü																		ü			7	
L10160, F10160	2/12/03	05		ü																									2	
L10163, F10163	2/ 3/03	02		ü	ü			ü																		ü			7	
L10172, F10172	4/14/03	05		ü				ü																		ü	ü		5	
L10181, F10181	3/25/03	02		ü		ü	ü		ü				ü													ü			8	
L10191, F10191	2/19/03	05		ü				ü	ü				ü																5	
L10211, F10211	3/10/03	05		ü				ü														ü	ü						5	
L10232, F10232	2/28/03	02		ü	ü			ü	ü									ü											6	
L10287, F10287	4/ 5/03	02		ü	ü				ü																				3	
L27981, F27981	4/14/03	05		ü				ü	ü					ü												ü			7	
L49261, F49261	4/11/03	03		ü	ü	ü	ü	ü	ü																	ü	ü		8	
L66375, F66375	3/27/03	03		ü	ü				ü		ü								ü							ü			7	
L66396, F66396	2/13/03	03		ü		ü		ü	ü													ü							5	
L66399, F66399	3/31/03	05	ü	ü				ü			ü															ü			6	
L66401, F66401	4/ 7/03	05		ü																						ü			2	
L66403, F66403	4/ 7/03	05		ü				ü											ü							ü			4	
L88976, F88976	4/28/03	05		ü				ü	ü																	ü			4	
L88998, F88998	4/ 4/03	01		ü						ü			ü	ü												ü			5	
L88999, F88999	4/ 8/03	01		ü																									1	
L89003, F89003	4/13/03	01		ü		ü		ü			ü	ü	ü													ü			7	
L89004, F89004	4/13/03	01		ü																									1	
L89005, F89005	4/15/03	01		ü				ü																ü	ü				5	
L89007, F89007	4/18/03	01		ü																						ü			3	
L89009, F89009	4/26/03	01		ü		ü		ü			ü																	ü	5	
Discharged Residents																														
L49273, F49273	1/11/03	03		ü	ü			ü																			ü			5
L66402, F66402	1/18/03	01		ü		ü																							3	
L66404, F66404	1/28/03	01		ü				ü																					3	

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Resident Name	Most Recent Assessment		Accidents		Behavioral			Clin	Cogn	Elimination/Continence			Infect	Nutrition			Pain		Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total	
	Date	AA8a	AA8b	New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr	Little Active		Pressure Ulcer
Discharged Residents																														
L88972, F88972	1/31/03	01		ü					ü					ü															ü	4
L88973, F88973	1/31/03	01		ü																				ü				ü	3	
L88974, F88974	2/ 4/03	01		ü											ü														ü	3
L88975, F88975	2/ 6/03	01		ü					ü					ü															ü	4
L88977, F88977	2/10/03	01		ü						ü		ü															ü		ü	5
L88978, F88978	2/11/03	01		ü																									ü	1
L88980, F88980	2/18/03	01		ü					ü																			ü	ü	4
L88990, F88990	3/14/03	01		ü						ü		ü																	ü	4

Individual QI / QM Series - Chronic Care: Prevalence of symptoms of depression without antidepressant therapy

(Only includes residents flagging on 1 or more QI/QMs ordered by resident name)

Resident Name	Most Recent Assessment		Accidents		Behavioral			Clin	Cogn	Elimination/Continence			Infect	Nutrition			Pain		Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total		
	Date	AA8a AA8b	New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr	Little Active	Pressure Ulcer			
Current Residents																															
L10130, F10130	3/ 3/03	05				Hi	Lo																								2
L10181, F10181	3/25/03	02		ü		ü					ü											ü					ü			8	
L49261, F49261	4/11/03	03		ü	ü	ü																ü					ü			8	
Discharged Residents																															
L66365, F66365	1/22/03	05																									ü	ü		8	
L88993, F88993	4/ 9/03	01				ü												ü								ü	ü			7	

Individual QI / QM Series - Chronic Care: Residents who lose too much weight

(Only includes residents flagging on 1 or more QI/QMs ordered by resident name)

Resident Name	Most Recent Assessment Date		Accidents		Behavioral			Clin	Cogn	Elimination/Continence			Infect	Nutrition			Pain Manag.		Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total		
	Date	AA8a	AA8b	New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr	Little Active		Pressure Ulcer	
Current Residents																															
L10127, F10127	4/28/03	05				ü			ü					ü	ü								ü				ü				6
L10145, F10145	3/24/03	05				ü									ü															2	
L10149, F10149	3/19/03	03		ü					ü						ü									ü	ü					5	
L10159, F10159	3/12/03	03		ü	ü				ü						ü							ü				ü				7	
L10163, F10163	2/ 3/03	02		ü	ü				ü						ü							ü				ü				7	
L10164, F10164	2/19/03	02			ü				ü	ü					ü	ü										ü				6	
L23075, F23075	3/19/03	01							ü						ü	ü								ü						4	
L27981, F27981	4/14/03	05		ü					ü	ü					ü				ü			ü				ü				7	
L42302, F42302	3/ 7/03	02			ü	ü			ü						ü							ü	ü			ü				7	
L42315, F42315	3/27/03	03							ü			ü			ü															4	
L66384, F66384	4/11/03	01			ü				ü						ü									ü						4	
L88991, F88991	4/ 5/03	01							ü	ü					ü	ü										ü	ü			6	
L88996, F88996	3/29/03	01							ü						ü									ü	ü					5	
L88998, F88998	4/ 4/03	01		ü							ü				ü	ü										ü				5	
Discharged Residents																															
L35324, F35324	1/ 6/03	01							ü						ü										ü					4	
L66362, F66362	1/13/03	01							ü						ü	ü								ü	ü		ü			7	
L66365, F66365	1/22/03	05					ü	ü	ü		ü				ü	ü										ü	ü			8	
L66395, F66395	1/ 8/03	01					ü			ü		ü			ü											ü				5	
L66398, F66398	1/11/03	01							ü						ü															2	
L88974, F88974	2/ 4/03	01		ü											ü															3	
L88981, F88981	2/22/03	01													ü								ü	ü		ü				5	
L88990, F88990	3/14/03	01		ü						ü		ü			ü															4	
L89002, F89002	4/12/03	01					ü			ü					ü				ü								ü			6	
L89008, F89008	4/20/03	01				ü			ü						ü				ü								ü			6	

Individual QI / QM Series - Chronic Care: Residents who have moderate to severe pain

(Only includes residents flagging on 1 or more QI/QMs ordered by resident name)

Resident Name	Most Recent Assessment Date		Accidents		Behavioral			Clin	Cogn	Elimination/Continence			Infect	Nutrition			Pain Manag.		Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total	
	AA8a	AA8b	New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr	Little Active	Pressure Ulcer		
Current Residents																														
L10159, F10159	3/12/03	03		ü	ü			ü						ü			ü				ü					ü				7
L10163, F10163	2/ 3/03	02		ü	ü			ü						ü			ü				ü					ü				7
L10166, F10166	2/28/03	02			ü			ü				ü					ü				ü							ü		7
L10224, F10224	3/17/03	05						ü									ü						ü							3
L10295, F10295	2/12/03	05						ü			ü	ü					ü	ü			ü					ü				7
L42315, F42315	3/27/03	03						ü				ü					ü													4
L49254, F49254	2/19/03	05						ü									ü													1
L66385, F66385	2/26/03	05						ü					ü				ü				ü	ü	ü	ü		ü				8
L66388, F66388	3/10/03	05						ü			ü						ü				ü					ü	ü			6
L66399, F66399	3/31/03	05	ü	ü				ü			ü						ü									ü				6
L88995, F88995	3/28/03	01						ü			ü						ü						ü	ü		ü				7
L88996, F88996	3/29/03	01						ü						ü			ü						ü	ü						5
L89005, F89005	4/15/03	01		ü				ü									ü						ü	ü						5
L89007, F89007	4/18/03	01		ü													ü									ü				3
Discharged Residents																														
L35317, F35317	3/17/03	05						ü									ü	ü			ü	ü								5
L35324, F35324	1/ 6/03	01						ü						ü			ü						ü							4
L42328, F42328	1/29/03	01	ü					ü									ü				ü									4
L66362, F66362	1/13/03	01						ü					ü	ü			ü						ü	ü		ü				7
L66368, F66368	1/22/03	05						ü		ü							ü				ü					ü	ü			6
L66402, F66402	1/18/03	01		ü			ü										ü													3
L88974, F88974	2/ 4/03	01		ü										ü			ü													3
L88975, F88975	2/ 6/03	01		ü				ü					ü				ü													4
L88977, F88977	2/10/03	01		ü					ü		ü						ü									ü				5
L88980, F88980	2/18/03	01		ü				ü									ü									ü				4
L88981, F88981	2/22/03	01												ü			ü					ü	ü			ü				5
L88986, F88986	3/ 5/03	01						ü									ü													2
L88993, F88993	4/ 9/03	01				ü	ü	ü					ü				ü									ü	ü			7
L89002, F89002	4/12/03	01							ü					ü			ü		ü							ü				6

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(Only includes residents flagging on 1 or more QI/QMs ordered by resident name)

Resident Name	Most Recent Assessment Date	AA8a	AA8b	Accidents		Behavioral			Clin	Cogn	Elimination/Continence			Infect	Nutrition			Pain Manag.	Phys Function			Psych Drug Use			Q. of Life		Skin Care		Total
				New Fract	Falls	More Deprs	Problem Behavior	Deprs No Tx	9+ Meds	Cog Impar	Incont	Indw Cath	Incont No TP	Fecal Impet	UTIs	Wt. Loss	Feed Tube	Dehyd	Pain	Decl ADLs	Bedfast	Decl Locomotion	Decl ROM	AntiP No Dx	Anti-Anxty	Hypn 2x wk	Daily Restr	Little Active	
Discharged Residents																													
L89008, F89008	4/20/03	01					ü			ü								ü		ü						ü			6