Loving Kindness Healthcare Systems
155 N. Craig Street Suite 160 Pittsburgh, PA 15213
412-578-9890 ~ 1-888-578-9890 ~ WWW.LKHSCORP.COM

CONSUMER INFORMATION

	Agency	☐Pending	☐Active
Name of Consumer (Last, First, Middle)		DOR	SOC
Address (Street, Road, Avenue; City or Town, State)		Zip Code	County

Telephone Number	Birth Date	Sex	Social Security Number	Recipient Number (MA
	,			

☐ Act 150 ☐ Aging ☐ Attendant Care ☐ COMMCARE ☐ IND ☐ OBRA Other

INSURANCE INFORMATION

Medicare No. _____ ☐Patient ☐Spouse

Insurance _____ ☐Patient ☐Spouse

Policy No. _____

Group No. _____ Preferred Hospital _____

Policy Holder _____ Phone No: _____

Phone No. Recent Hospitalization

CAREGIVER INFORMATION

Emergency Contact _____ Home Phone _____ POA Y ☐ N ☐

Relationship _____ Mobile Phone _____

Power of Attorney _____ Home Phone _____

Relationship Mobile Phone

PHYSICIAN AND DIAGNOSIS INFORMATION

Primary Care Physician _____ Phone No. _____

Address _____

NPI#: _____

Diagnosis _____

ATTENDANT NEEDS

Hours & Days Requested ____ Total Hours Authorized

Sun	Mon	Tues	Wed	Thu	Fri	Sat

Smoker ☐ Yes ☐ No ☐ None Start Date _____

Attendant Preference ☐ Male ☐ Female ☐ None Pets ☐ Yes ☐ No _____

Bus Accessible ☐ Yes ☐ No

Ambulatory Status/Mobility Device _____

Transfer Information _____ Height _____

Has Lift ☐ Yes ☐ No

Dietary Needs _____

Living Arrangement _____ Allergies _____

☐Money Management ☐Using the Phone ☐Bathing ☐Walking ☐Dressing ☐Meal Prep ☐Oral Hygiene

☐Managing Medications ☐Household chores ☐ROM ☐Eating ☐Laundry ☐Errands ☐ Other

Has Patient Received Home Health Services In The Past 60 Days? ☐ Yes ☐ No

Agency _____ Phone No. _____

Care Manager Phone No.