**“Warm” Handoff Checklist**

* Overview of patient’s hospital course
* Vital signs
* Medication list (date and time the last dose was given; date and time the next dose is due; high-risk medications; medication allergies)
* Advance directive(s) and Goals of Care, (i.e., Full Code, DNR, DNI, Do Not Hospitalize, MOLST)
* Treatment plans
* High-risk conditions
* Relevant lab and diagnostic testing results, pending or outstanding tests
* Communication(s) between patient, family members, and caregivers
* Behavioral issues
* Follow-up appointments that have been or need to be made
* Special care needs (e.g. wound care, diet, catheters, infection control issues, skin integrity, fall risk, specialized equipment)
* Hospital follow-up contact information (e.g., PCP or hospitalist name and phone number; specialist name and phone number)