

Your
Hospital's
Logo
Here

MASTER THERAPY SERVICE LOG (Medicare A PPS Only)

ARD: _____

NAME:	MR #:	ONSET DATE:	ADMISSION DATE:	MONTH / YEAR:
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Check Assessment Ref. Date		T	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Day from Admission																																			
O T	EVALUATION (Use √mark)																																		
	Total Direct Minutes																																		
P T	EVALUATION (Use √mark)																																		
	Total Direct Minutes																																		
S L P	EVALUATION (Use √mark)																																		
	Total Direct Minutes																																		
RUG CATEGORY																																			
Total Direct Minutes																																			
SECTION T of MDS		5	A	B	C	D	E							1	4	A	B	C	D	E															
Indicate Level Below Alphabet																																			

Enter Code - (if not seen for service)

- R** = Refusal **HD** = Refusal
- S** = Sick **W** = Withheld
- H** = Hosp **X** = Hol / Wknd

7 - Day RUGS LEVEL (min)

- U** = Ultra High: 720 **V** = Very High: 500 **H** = High: 325
- M** = Medium: 150 **L** = Low: 45