| **Care Area** | **Probe** | **Response Options** |
| --- | --- | --- |
| For **any resident marked as non-interviewable, refused, unavailable or out of facility** the following areas should be reviewed in the record regardless of whether the area is an indicator for the resident. |
| Pressure Ulcers | * Did the resident develop a pressure ulcer in the facility that has not healed?
* Did the resident have a pressure ulcer that worsened and hasn’t improved recently?
* *Does the resident currently have a pressure ulcer that became infected in the facility?*

Note: Exclude Stage 1 pressure ulcers.  | No Issues/NAFurther Investigation MDS Discrepancy |
| Dialysis | * Is the resident receiving peritoneal dialysis or hemodialysis?
 | No IssuesFurther InvestigationNAMDS Discrepancy |
| Nutrition | * Did the resident have an unplanned weight loss of 5% or more in the last month or 10% or more in the last 6 months?
* Does the resident still have weight loss?

Note: Exclude residents currently receiving hospice or end of life services.  | No Issues/NAFurther Investigation MDS Discrepancy |
| Respiratory Infection | * Does the resident currently have a respiratory infection?
 | No Issues/NAFurther InvestigationMDS Discrepancy |
| Urinary Tract Infection (UTI) | * Does the resident currently have a UTI?
 | No Issues/NAFurther InvestigationMDS Discrepancy |
| Infections (not UTI, Pressure Ulcer, or Respiratory) | * Does the resident currently have any other infection (e.g., surgical infection, eye infection, *C. difficile, sepsis, or gastroenteritis such as norovirus*)?
 | No Issues/NAFurther InvestigationMDS Discrepancy |
| Falls | * Did the resident have a fall(s) with major injury in the last 120 days?
 | No Issues/NAFurther InvestigationMDS Discrepancy |
| ADL Decline | * Has the resident had a decline in their bed mobility, transfer, eating or toilet use recently and is not receiving therapy or restorative for the decline in the last 120 days?
 | No Issues/NAFurther Investigation MDS Discrepancy |
| Low Risk B&B | * Is the resident incontinent of bowel or bladder and not at a high risk for incontinence issues?

Note: High risk means the resident is cognitively impaired, receives hospice or end of life services, or requires extensive to total assistance from staff with bed mobility, transfers, toileting or locomotion.  | No Issues/NAFurther Investigation MDS Discrepancy |
| Hospitalization | * Was the resident re-hospitalized in the last 120 days?
 | No Issues/NAFurther InvestigationMDS Discrepancy  |
| Elopement | * Is the resident at risk for elopement?
* Has the resident eloped in the last *120 days*?
 | No Issues/NAFurther Investigation MDS Discrepancy |
| Change of Condition | * Has the resident had a change of condition in the last 120 days that was not identified, monitored or treated appropriately?
 | No Issues/NAFurther Investigation  |
| For **all residents** who are observed during the initial pool process, the record is reviewed for high risk meds and PASRR only if the resident has the indicator present.  |
| Insulin | * Is the resident currently receiving insulin?
 | YesNoMDS Discrepancy |
| Anticoagulant | * Is the resident currently receiving an anticoagulant?
 | YesNoMDS Discrepancy |
| Antipsychotic with Alzheimer’s or Dementia | * Is the resident currently receiving an antipsychotic and has a diagnosis of Alzheimer’s or dementia?
 | YesNoMDS Discrepancy |
| *Antibiotic* | * *Is the resident currently receiving an antibiotic?*
 | *Yes**No**MDS Discrepancy* |
| *Antipsychotic with New Schizophrenia Diagnosis* | * *Is the resident currently receiving an antipsychotic and has a new diagnosis of schizophrenia?*
 | *Yes**No* *MDS Discrepancy*  |
| PASRR | * Was a Level II PASRR adequately completed and determined the resident does not qualify for Level II services even though the resident has a serious mental illness, ID or other organic condition related to ID/DD?
 | No Issues/NAFurther InvestigationsMDS Discrepancy |
| For **all residents** who are observed during the initial pool process, the record is reviewed for Advanced Directives and Other. |
| Advance Directives | * Does the resident have an advance directive in place?

If information is kept in two places (e.g., EHR and the hard chart), ensure the information matches. | No Issues/NAFurther Investigation |
| Other | * Did you have any additional concerns that you identified from the record?
 | No Issues/NAFurther Investigation |
| For **new admissions** added to the Resident Listing who are observed during the initial pool process (i.e., they don’t have an MDS), the record is reviewed for high risk meds. |
| High Risk Meds | * Is the resident currently receiving any of the following medications at least one time in the last 30 days? (Mark all that apply)

AntipsychoticAntianxietyAntidepressantHypnoticAnticoagulantAntibioticDiureticInsulinOpioidsNone of the aboveNote: Do not code aspirin or Plavix as an anticoagulant. Code medications according to a drug’s pharmacological classification, not how it is used.  | Select all that apply. |
| Diagnoses | * Does the resident have any of the following diagnoses? (Mark all that apply)

Alzheimer’s or dementiaHuntington’s syndromeTourette’s SyndromeManic Depression (bipolar disease)SchizophreniaCerebral PalsyMultiple SclerosisSeizure Disorder/Epilepsy None of the above | Select all that apply. |
| *New Schiz and Antipsychotic* | * *Is the resident at least 65 years of age, receiving an antipsychotic, and has a new diagnosis of schizophrenia since admission?*
 | *Yes**No* |
| Hospice | * Is the resident receiving hospice, end of life, or palliative care services?
 | YesNoMDS Discrepancy |