Reducing Risk.
Improving Stability.
Supporting Home Nutrition Success.

Partner with Barnes for a seamless transition to home nutrition therapy

800-422-5059 ext. 1480

tcchit@barneshc.com

Comprehensive clinical support designed to deliver:

Line-Care & Infection Prevention

Sterile-line care education (S.A.S.H. Method), weekly skilled nursing visits, and ongoing reinforcement

Metabolic Stability

Routine lab surveillance, clinical review, and ongoing therapy optimization led by pharmacists and dietitians.

Clinical Monitoring

Proactive monitoring with structured assessments and early intervention to prevent complications

Caregiver Confidence

Hands-on training, competency validation, and ongoing support to ensure safe care at home

Coverage Complexity

Alignment with payor requirements and re-certification support to ensure continuity of therapy

Barnes Healthcare Services functions as an extension of the clinical team, supporting metabolic stability, line safety, and longer-term nutrition success in the home setting.

HHA LIC#299995451
HHA LIC#299993216
HHA LIC#299993224

BARNES HEALTHCARE SERVICES

www.barneshc.com

TPN Referral Checklist

Please feel free to send over demographics and insurance information along with all therapies needed so we can begin checking benefits while the other information is gathered.

- [ ] Demographics/insurance
- [ ] H&P
- [ ] TPN order
- [ ] Nutrition note(s) (initial assessment and any follow-ups)
- [ ] Height and weight
- [ ] Line placement report (must show tip placement)
- [ ] Labs on day of discharge
- [ ] Current progress note(s)
- [ ] Discharge summary when available
- [ ] Confirmation of Follow-up with doctor
- [ ] Confirmation of who will provide nursing care at home
- [ ] Confirmation of who will be managing TPN
- [ ] Barnes' order signed (will be typed up with the final formula for the doctors to sign)

For Medicare patients we will need the additional information to try and qualify:

- [ ] Documentation showing/supporting altered GI function (dysmotility or malabsorption)
- [ ] Statement as to why the patient cannot have a G or J tube or enteral nutrition
- [ ] Statement on how long the patient will need TPN, known as the Length of Need (either in months or for an indefinite duration, with a minimum of 3 months to qualify)
- [ ] TPN formula meets Medicare guidelines, or we have documentation supporting why it's outside of guidelines
- [ ] Provider signing the Barnes' order will need to be PECOS registered, and we need to have a note from the signing provider that it is within the last 30 days

Please let us know if you have any questions or concerns
We look foward to working with you!

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