

# SutureSign Templates

***It is extremely important to SELECT THE CORRECT TEMPLATE in SutureSign so that the document is processed correctly.***

## **Templates define:**

1. **Signature Location, and**
2. **Document Type**

Verify signature placement on  
**EACH PAGE** prior to sending!

To create templates with custom names and/or signature locations, [watch the training video.](#)

**Effective Date** is the date that the document became effective. Examples include:

- Date a verbal order was given,
- Start of Care for a “home health certification”, or *initial* plan of care,
- Start of Episode for a “recertification”.
  - (NOTE: if Start of Care ≠ Start of Episode, the document is a recertification, NOT a certification.)

## **Template Types & Descriptions**

NAME	ALSO KNOWN AS	DESCRIPTION
<b>COMMONLY MISTAKEN</b>		
Home Health Certification	485, Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for home health services that includes the initial plan of care. Start of Care = Start of Episode
Home Health Eligibility Summary		Information provided by agency to document a patient's eligibility for home health services, often used as corroborating information for the Face-to-Face
Home Health Face-to-Face Note	F2F note	Home Health Face-to-Face encounter note from a different physician sent to new physician for signature
Home Health Recertification	485, Recert, Plan of Care (POC), Plan of Treatment (POT)	Re-certification (subsequent certification) for home health services that includes the subsequent plan of care. Start of Care ≠ Start of Episode
Plan of Care Approval (Home Health)		PCP approval of a plan of care provided by a different physician OR an order that includes an estimated duration of need for home health services.  This is NOT a Certification.
<b>GENERAL</b>		
Discharge Summary - Hospital	DC Summary	Discharge summary from hospital
General Communication		Miscellaneous communication

Medical Order		Miscellaneous medical order
Medication Summary		Summary of medications
Wound Photo		Photo of wound
<b>HOME HEALTH</b>		
Discharge Summary - Home Health	DC Summary	Summary of patient's care throughout episode provided at time of discharge
Home Health Assessment	Assessment, OASIS	In whole or in part, an assessment of patient, such as OASIS, sometimes used as corroborating information for the Face-to-Face encounter
Home Health Certification	485, Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for home health services that includes the initial plan of care. Start of Care = Start of Episode
Home Health Eligibility Summary		Information provided by agency to document a patient's eligibility for home health services, often used as corroborating information for the Face-to-Face
Home Health Face-to-Face	F2F, Face-to-Face Encounter	Documentation of face-to-face encounter with physician as required for initiation of home health services
Home Health Face-to-Face (non-primary)	F2F, Face-to-Face Encounter	Same as Home Health Face-to-Face with initial orders included, typically because physician completing will not be signing the Certification.
Home Health Face-to-Face Note		Home Health Face-to-Face encounter note from a different physician sent to new physician for signature
Home Health Interim Order	Physician Order (PO), Physician Interim Order (PIO), Supplemental Order, Verbal Order	General-use order after the initial plan of care. similar to Medical Order but specific to home health.
Home Health Recertification	485, Recert, Plan of Care (POC), Plan of Treatment (POT)	Re-certification (subsequent certification) for home health services that includes the subsequent plan of care. Start of Care ≠ Start of Episode
Plan of Care Approval		PCP approval of a plan of care provided by a different physician OR an order that includes an estimated duration of need for home health services.  This is NOT a Certification.
Statement of Medical Need		Document stating why patient needs home health services required by some states (i.e. TX)
<b>HOSPICE</b>		
Certificate of Terminal Illness	CTI	Physician certification that patient has a terminal illness as required for the hospice benefit.
Discharge Summary - Hospice	DC Summary	Summary of patient's care throughout episode provided at time of discharge
Hospice Certification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for hospice services that includes the initial plan of treatment.

Hospice Interim Order	Physician Order (PO), Physician Interim Order (PIO), Supplemental Order, Verbal Order	General-use order after the initial plan of treatment. similar to Medical Order but specific to hospice.
Hospice Recertification	Recert, Plan of Care (POC), Plan of Treatment (POT)	Subsequent certification for hospice services that includes the subsequent plan of treatment.
<b>MEDICAL SUPPLY</b>		
Certificate of Medical Necessity	CMN	Certification by physician that patient needs a particular medical device.
Medical Supply Order		Medical order for a medical device.
<b>NUTRITION</b>		
Nutrition Order		General-use order after the initial plan of care. similar to Medical Order but specific to nutrition.
<b>OCCUPATIONAL THERAPY</b>		
Discharge Summary - Occupational Therapy	DC Summary	Summary of patient's care throughout episode provided at time of discharge
Occupational Therapy Certification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for OT services that includes the initial plan of treatment.
Occupational Therapy Evaluation	Eval	Initial evaluation of patient for OT services
Occupational Therapy Order		General-use order after the initial plan of care. similar to Medical Order but specific to OT.
Occupational Therapy Recertification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Subsequent certification for OT services that includes the subsequent plan of treatment.
<b>PHARMACY</b>		
Pharmacy Order		General-use order after the initial plan of care. similar to Medical Order but specific to pharmacy.
<b>PHYSICAL THERAPY</b>		
Discharge Summary - Physical Therapy	DC Summary	Summary of patient's care throughout episode provided at time of discharge
Physical Therapy Certification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for PT services that includes the initial plan of treatment.
Physical Therapy Evaluation	Eval	Initial evaluation of patient for PT services
Physical Therapy Order		General-use order after the initial plan of care. similar to Medical Order but specific to PT.
Physical Therapy Recertification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Subsequent certification for PT services that includes the subsequent plan of treatment.
<b>SPEECH THERAPY</b>		
Discharge Summary - Speech Therapy	DC Summary	Summary of patient's care throughout episode provided

		at time of discharge
Speech Therapy Certification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Initial certification for ST services that includes the initial plan of treatment.
Speech Therapy Evaluation	Eval	Initial evaluation of patient for ST services
Speech Therapy Order		General-use order after the initial plan of care. similar to Medical Order but specific to ST.
Speech Therapy Recertification	Cert, Plan of Care (POC), Plan of Treatment (POT)	Subsequent certification for ST services that includes the subsequent plan of treatment.