

# How to Make a Lifeline Referral

## 1. Assess patient for Fall Risk:

- MAHC-10 Score 4 or greater (especially for non-modifiable risk factors)
- Environmental hazards – scatter rugs, pets, clutter
- Polypharmacy
- Lives alone some or all the time
- Functional mobility impairment
- Visual impairment
- Fall history
- Multiple chronic conditions

*Note: Check to ensure patient has a home phone landline.  
Lifeline only works with a landline.*

## 2. Discuss value of Lifeline:

- Ask — *“What would happen if you fell and were badly injured, unable to call for help?”*  
— *“In case of an emergency how would you get help if you needed it?”*
- Home Health VNA is partnering with Lifeline to provide an emergency response button with fall detection.  
— *“Would it be OK if I had someone from Lifeline call you about getting help if you fall or have an emergency?”*
- Lifeline is the Industry leader among Personal Emergency Response products
- FDA Approved
- Peace of mind for patient and family members
- A Home Health VNA Partner - we will know if patient is hospitalized to better coordinate follow-up service

## 3. Ask permission for one of our representatives to call patient or a family member to learn more about Lifeline

## 4. Write a Call Log - see examples below

Call Log (example 1)

Subject: Lifeline

Call patient at 978-555-1515

**REMEMBER: Always use the Subject Line “Lifeline”**

Call Log (example 2)

Subject: Lifeline

Call patient’s daughter Mary Smith at 978-769-1111

**In the body of the Call Log, write a one line instruction to call either the patient or full name of the caregiver. Always identify the caregiver’s relationship to the patient and include a contact telephone number.**

*Let the Experts at Lifeline Referral Center do the rest!*



Home Health VNA  
Merrimack Valley Hospice  
HomeCare, Inc.

The Leaders in Home Health and Hospice Care

# Referral Form

Please complete and fax to 1-866-211-6693  
Attention: Customer Sales Referral Specialist

Date: \_\_\_\_\_

From: \_\_\_\_\_

Please let me know the status of my referral via:

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

## Customer Being Referred

Wants to order

Wants more information

Yes, I have confirmed with the customer being referred that Philips Lifeline will be contacting them about service.

Philips Lifeline Medical Alert Service

Learn more at [www.Lifelinesystems.com/info](http://www.Lifelinesystems.com/info)

Lifeline with AutoAlert\*

The **ONLY** medical alert pendant  
that calls for help if a fall is detected

Philips Medication Dispensing Service

Learn more at [www.managemypills.com](http://www.managemypills.com)

First/Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Promotion Code on coupon (if applicable) \_\_\_\_\_

## Contact Person (if other than person being referred)

Name \_\_\_\_\_ Best Date and Time to Call \_\_\_\_\_

Phone \_\_\_\_\_ Relationship to Customer \_\_\_\_\_

## Special Requests

3rd Party Notify  (Check if you would like fax notification upon subscriber transport to hospital or event).

Name to fax notification to \_\_\_\_\_ Fax number \_\_\_\_\_

## For LPM/LCOM Use Only

I am a Lifeline Program Manager or Lifeline Community Outreach Manager

Referred by \_\_\_\_\_ NA \_\_\_\_\_ Program Code:

Referral Source Code: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Company: \_\_\_\_\_

\*Lifeline with AutoAlert does not detect 100% of falls. If able, users should always push their button when they need help.

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Philips Lifeline 111 Lawrence Street, Framingham, MA 01702-8154 [www.lifelinesystems.com/info](http://www.lifelinesystems.com/info)

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