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# **EXHIBIT 2**

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**San Luis Walk-In Clinic, Inc.  
City of San Luis Fire Department  
Yuma County Community Integrated Paramedic Pilot Project**

**Home Visit**

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Date of Visit	Time In/Time out	Total Time	Total Miles	Next Scheduled Visit

**Home Visit Vitals:**

<i>Pulse</i>	<i>B/P</i>	<i>Respirations</i>	<i>Skin</i>	<i>SPO2</i>	<i>Lung Sounds</i>	<i>FSBS</i>	<i>Weight</i>

**Participant Goals/Care Plan:** (List any health or related goals the participant feel will benefit them in the future i.e. Health, or nutritional education, weight loss, remaining independent etc.....)

**Participant Goal and Timeframe.** \_\_\_\_\_

- \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

ENVIRONMENTAL SCAN/ SAFETY SURVEY – Date Form Completed:					
Environmental Mitigation		Trip/Fall Mitigation		Other mitigation efforts	
Yes	No	Yes	No	Yes	No



- Any initial fixes identified (i.e. light bulb change, smoke detector batteries, water leaks...):

1. \_\_\_\_\_
2. \_\_\_\_\_

- Ongoing fixes identified:

1. \_\_\_\_\_  
Date Completed: \_\_\_\_\_

2. \_\_\_\_\_  
Date Completed: \_\_\_\_\_

3. \_\_\_\_\_  
Date Completed: \_\_\_\_\_

4. Other: \_\_\_\_\_

Completed by Name: \_\_\_\_\_ Title: \_\_\_\_\_

Unit #: \_\_\_\_\_ Fire Department Station: \_\_\_\_\_



Home Services CPT Codes	Diagnostic Code
<p><b>New Patient</b></p> <p>___ 99341 –Low severity problem 20 minutes</p> <p>___ 99342 –Moderate severity problem, 30 minutes</p> <p>___ 99343 –Moderate to high severity problem, 45 minutes</p> <p>___ 99344 –High Severity problem 60 minutes</p> <p>___ 99345 –Patient unstable or significant new problem requireing immediate attention, 75 minutes</p>	<p>___ Diabetes without Complications , E11.9</p> <p>___ Diabetes Type 2 with unespecify complications, E11.8</p> <p>___ Diabetes Type 2 with other especify Complications</p> <p>___ Hyperlipidemia, E78.2</p> <p>___ Hypertension, I10</p>
<p><b>Established Patient</b></p> <p>___ 99347 –Self-limited or minor problme, 15 minutes</p> <p>___ 99348 – Low moderate problem, 25 minutes</p> <p>___ 99349 – Moderate to high problem, 40 minutes</p> <p>___ 99350 – Patient unstable or significant new problem requireing immediate attention, 60 minutes</p>	<p>___ Wound :</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>Nutrition Assessment</b></p> <p>___ 97802 -Initial assessment and intervention, individual, face-to-face with the patient, each 15 minute</p> <p>___ 97803 -Re-assessment and intervnetion, individual, face-to-face with the patient, each 15 minute</p>	<p>Anxiety F06.4</p> <p>Depression F32.9</p> <p>Aggressive(ness) F91.1</p> <p>Altered Awareness R40.4</p> <p>Suicidal T14.91</p> <p>Panic Attack F41.0</p> <p>Hallucination R44.3</p> <p>Hyperventilating F45.8</p>
<p>Other: _____</p> <p>_____</p> <p>_____</p>	