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Untangle Your MDS 3.0 Data Processes

MDS Data Formulation & Documentation

Central Documentation Form Instructions
Note: This form is printable, and meant for use by Administrators and MDS Managers

- Date the form each time you edit or change information.

- Staff name and title.

- MDS Submission Deadline – when does data need to be documented or completed to the MDS office.

- RAI Manual Date – Record date that RAI Manual instructions were given to staff coding the Section.

- Training Notes - Specific orientation and training documentation with dates.

- Updates – record when coding updates are given to the staff member.

- Open column for facility specific data or administrative approvals of changes.

- This master form should be in the MDS office – (managed by the MDS manager) and in the Administrator's office to demonstrate regulatory compliance.

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Scheduling						

continued

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Section A Identification Information						
Section B Hearing, Speech, and Vision						
Section C Cognitive Patterns						
Interview						
Section D Mood						
Interview						
Section E Behavior						

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Section F Preferences for Customary Routine and Activities						
Interview						
Section G Functional Status						
Section G Functional Abilities and Goals						
Section H Bladder and Bowel						
Section I Active Diagnoses						

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Section J Health Conditions						
Interview						
Section K Swallowing/ Nutritional Status						
Section L Oral/Dental Status						
Section M Skin Conditions						
Section N Medications						

continued

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Section O Special Treatments						
Section P Restraints and Alarms						
Section Q Participation in Assessment and Goal Setting						
Interview						
Section Z Assessment Administration Z-100						

Documentation	Staff Name/Title	MDS Submission Deadline	Date RAI Manual Provided	Training Notes & Dates	Recorded Updates	Additional Notes
Z400						

Administrator: _____   _____

                              Signature   Date

MDS Manager: _____   _____

                              Signature   Date