

Track Changes
from Chapter 3 Section O v1.14
to Chapter 3 Section O v1.15

Chapter	Section	Page	Change
3	O0100	O-5	<ul style="list-style-type: none"> 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html
3	O0300	O-13	<ul style="list-style-type: none"> The CDC has evaluated inactivated influenza vaccine co-administration with the pneumococcal vaccine systematically among adults. It is safe to give these two vaccinations simultaneously. If the influenza vaccine and pneumococcal vaccine will be given to the resident at the same time, they should be administered at different sites (CDC, 2009). If the resident has had both upper extremities amputated or intramuscular injections are contraindicated in the upper extremities, administer the vaccine(s) according to clinical standards of care. “Up to date” in item O0300A means in accordance with current Advisory Committee on Immunization Practices (ACIP) recommendations. If a resident has received one pneumococcal vaccination and it has been less than one year since the resident received the vaccination, he/she is not yet eligible for the second pneumococcal vaccination; therefore, O0300A is coded 1, yes, indicating the resident’s pneumococcal vaccination is up to date.
3	O0300	O-13– O-14	Page length changed due to revised content on O-13.

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3	O0400	O-19	<ul style="list-style-type: none"> The time required to adjust equipment or otherwise prepare the treatment area for skilled rehabilitation service is the set-up time and is to be included in the count of minutes of therapy delivered to the resident. Set-up may be performed by the therapist, therapy assistant, or therapy aide. Respiratory therapy—only minutes that the respiratory therapist or respiratory nurse spends with the resident shall be recorded on the MDS. This time includes resident evaluation/assessment, treatment administration and monitoring, and setup and removal of treatment equipment. Time that a resident self-administers a nebulizer treatment without supervision of the respiratory therapist or respiratory nurse is not included in the minutes recorded on the MDS. Do not include administration of metered-dose and/or dry powder inhalers in respiratory minutes.
3	O0400	O-19– O-46	Page length changed due to revised content on O-19.
3	O0600	O-43	CMS does not require completion of this item; however, some States continue to require its completion. It is important to know your State’s requirements for completing this item.
3	O0600	O-44	<ul style="list-style-type: none"> Record the number of days that physician progress notes reflect that a physician examined the resident (or since admission if less than 14 days ago). If the State does not require the completion of this item, use the standard “no information” code (a dash, “-”).
3	O0700	O-45	CMS does not require completion of this item; however, some States continue to require its completion. It is important to know your State’s requirements for completing this item.
3	O0700	O-45	<ol style="list-style-type: none"> Review the physician order sheets in the medical record. Determine the number of days during the 14-day look-back period that a physician or other authorized practitioner allowable by State law changed the resident’s orders.
3	O0700	O-45	<ul style="list-style-type: none"> Enter the number of days during 14-day look-back period (or since admission, if less than 14 days ago) in which a physician changed the resident’s orders. If the State does not require the completion of this item, use the standard “no information” code (a dash, “-”).

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3	O0700	O-45	<ul style="list-style-type: none">Includes orders written by medical doctors, doctors of osteopathy, podiatrists, dentists, and physician assistants, nurse practitioners, or clinical nurse specialists, qualified dietitians, clinically qualified nutrition professionals or qualified therapists, working in collaboration with the physician as allowable by state law.