



## TELEPHONY TASK ID #'S

<b><u>MATRIXCARE TELEPHONY PHONE #</u></b>	
1 (866) 543-5215	
Telephony ID: _____	
<b><u>MATRIXCARE MOBILE URL</u></b>	
<a href="https://app.soneto.net/web/IndianaHomecare">https://app.soneto.net/web/IndianaHomecare</a>	
USERNAME: _____	
PASSWORD: _____	
SIGNATURE PIN: _____	

BATHING	
Tub/Shower	1
Bed Bath	2
Partial Bath	3
Shower Assist (ATTC ONLY)	4
Sink Bath	45
HYGIENE & GROOMING	
Assist with Dressing	5
Hair Care/Shampoo	6
Skin Care	7
Foot Care	8
Check Pressure Areas	9
Nail Care	10
Oral Care	11
Other	12
Assist with Elimination (Toileting)	13
ACTIVITY	
Assist with Ambulation (WC/Walker/Cane)	18
Mobility Assist (w/transfers)	19
Mobility Assist (w/transfers) *HOYER*	20
ROM - Active	21
Positioning	22
Exercise	23
Other	24

PROCEDURES	
Catheter Care/Ostomy	14
Monitor Intake/Output	15
Medication Reminder	16
Other	17
NUTRITION	
Meal Preparation	25
Assist with Feeding	26
Limit/Encourage Fluids	27
Other	28
OTHER	
Equipment Care	38
Transportation Needs (W/ CLIENT)	39
Shopping (CG ONLY)	40
Unusual Findings	44
HOUSEHOLD SERVICES	
Laundry	29
Light Housekeeping (HHA)	30
Dust	31
Clean Kitchen after use	32
Clean Bathroom after use	33
Vacuum/Sweep/Mop	34
Change Bed Linens	35
Clean Living Areas	36
Other (Trash, Windows, Walkways, etc.)	37
PRECAUTIONS	
Observed Standard Precautions	46
Observed Contact Precautions	47
Observed Droplet Precautions	48
Observed Airborne Precautions	49
Diabetic Precaution	63
Seizure Precaution	64
Respiratory Precaution	65
Bleeding Precaution	66
Falls Precaution	67
Oxygen Precaution	68
Other Precaution	69
Code Status	70
COVID Screening	71
RESPITE	
RESPITE Reason	41
RESPITE Location Provided	42
RESPITE Type	43