



# AmeriBest Home Care

## Electronic Visit Verification Correction Form

Caregiver Name (Printed)	Client Name (Printed)

Signatures					
Client and Caregiver MUST sign below. Only full signatures with first and last name will be accepted. If client is physically unable to sign full name, witness must sign their full name after the client's mark. Client's signature certifies that the services documented are accurate and true.					
Date	Time In	Date	Time Out	Client Signature	Caregiver Signature

Plan of Care			
Task	✓	Task	✓
Tub	<input type="checkbox"/>	Assist with Ambulation: W/c Walker/ Cane	<input type="checkbox"/>
Shower	<input type="checkbox"/>	Catheter Care	<input type="checkbox"/>
Shower w/Chair	<input type="checkbox"/>	Empty urinary bag	<input type="checkbox"/>
Sponge bath	<input type="checkbox"/>	Empty ostomy bag	<input type="checkbox"/>
Assist with dressing	<input type="checkbox"/>	Record Intake/Output	<input type="checkbox"/>
Hair Care	<input type="checkbox"/>	Medication Reminder	<input type="checkbox"/>
Shampoo	<input type="checkbox"/>	Passive ROM	<input type="checkbox"/>
Skin Care	<input type="checkbox"/>	Meal Preparation	<input type="checkbox"/>
Foot Care	<input type="checkbox"/>	Assist with Feeding	<input type="checkbox"/>
Check Pressure Areas	<input type="checkbox"/>	Limit/Encourage Fluids	<input type="checkbox"/>
Nail Care	<input type="checkbox"/>	Grocery Shopping	<input type="checkbox"/>
Oral Care	<input type="checkbox"/>	Wash Clothes	<input type="checkbox"/>
Clean Dentures	<input type="checkbox"/>	Equipment Care	<input type="checkbox"/>
Assist with Elimination	<input type="checkbox"/>	Light Housekeeping: Bedroom/Bathroom/ Kitchen/ Change Linen	<input type="checkbox"/>

Reason for EVV Error (Select One & Add Notes)	
Forgot to use EVV ____ Phone/Device not working ____ Schedule Change not reported to office ____	Notes:

Complete and return to office within 48 hours or your pay may be delayed

Mail to:  
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 Philadelphia, PA 19123

Fax: (215) 925-3828  
 Email: [Timesheet@Ameribest.org](mailto:Timesheet@Ameribest.org)