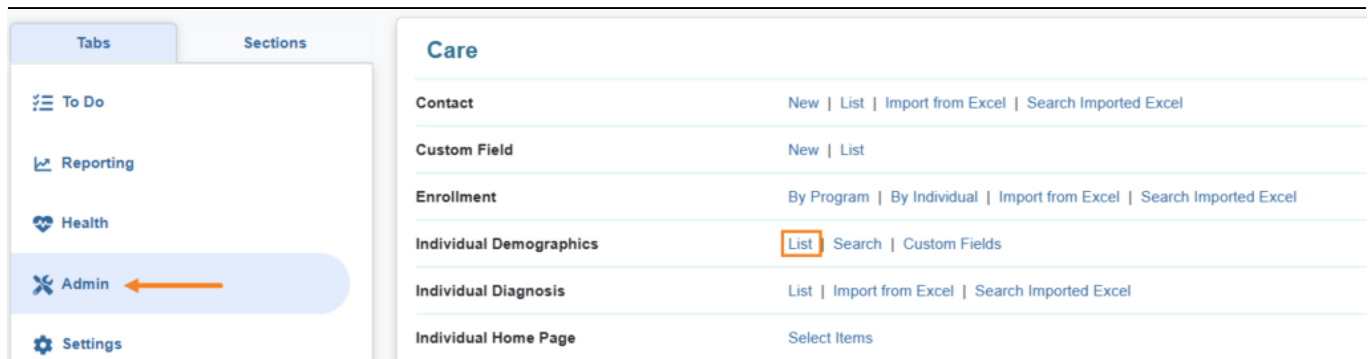


# Individual Discharge 操作

Individual (個人) の Discharge (退院) を行うには、Therap の Discharge 機能を使用する必要があります。

Therap の **IDF Admin** 機能を使用するには、**Individual Admit/Discharge Caseload-Super Role** を持つ権限が必要です。Individual Discharge 操作のステップは以下の通りです。

1. **Admin** から **Care** を選択し、**Individual Demographics** の **List** をクリックします。



2. **Individual Search** を入力し、**Individual/Discharge** を検索して、**Discharge** をクリックします。

Individual Search

Filter 15 Records

Form ID	Individual	Social Security Number	Medicaid Number	Medicare Number	Status	Birth Date	Case Status	Entered By	Admitted By	Last Updated By	Admission Date	Individual ID Number	Time Zone
IDF-DEMOTPHL-J9M4JSPWUMULF	Abraham, Isaac				Admitted	02/01/2011	Active	Hossain, Anwar / Supervisor	Hossain, Anwar / Supervisor	Rahman, Imran / Academic Coordinator- IE	01/02/2020		Asia/Manila
IDF-DEMOTPHL-K9V4NHPZDMUL3	Abraham, Paul				Admitted	05/17/2010		Rahman, Imran / Academic Coordinator- IE	Rahman, Imran / Academic Coordinator- IE	Akter, Amina / Academic Coordinator	01/03/2020		Asia/Manila
IDF-DEMOTPHL-H7R4NGBY2MULH	Afreen, suha				Admitted			Hossain, Anita / Academic Supervisor	Rahman, Imran / Academic Coordinator- IE	Rahman, Imran / Academic Coordinator- IE	06/01/2022		Asia/Manila

Showing 1 to 3 of 3 entries Previous 1 Next

**Individual Demographic Form (IDF)-** □□ □□□□□□ □□□□□□ □□ □□□□ □□□□ □□□  
**Discharge** □□□□ □□□□ □□□□

Individual Demographic Form (IDF) Admitted 3

T-Notes

**Individual** Paul Abraham

<b>Photo 1</b>		<b>Photo 1 Date</b>	
<b>Title</b>	Mr	<b>Gender</b>	Male
<b>First Name</b>	Paul	<b>Last Name</b>	Abraham
<b>Middle Name</b>		<b>Suffix</b>	
<b>Birth Date</b>	05/17/2010	<b>Goes By</b>	
<b>SSN</b>		<b>Medicaid Number</b>	
<b>E-mail</b>		<b>Phone Number</b>	
<b>Race</b>		<b>Ethnicity / Hispanic Origin</b>	
<b>Tribe</b>		<b>Class Membership</b>	

**Residential Address**

**Attention or in care of**

**Address**

**Location**

**Primary Phone** **Secondary Phone**

**Additional Phone**

**Mailing Address**

**Attention or in care of**

**Address**

**Primary Phone** **Secondary Phone**

**Additional Phone**

[View PDFs](#)

**Discharge Date**  **Discharge Reason**

**Discharge Comments**

- **Discharge Date**

Discharge Individual **Admitted**

T-Notes

Individual Paul Abraham

\* Discharge Date

MM/DD/YYYY

\* Discharge Reason

Discharge Comments

Remove Individual From Enrolled Program(s)

May 2023

Su	Mo	Tu	We	Th	Fr	Sa
30	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3
4	5	6	7	8	9	10

- **Discharge Reason**



□. □□□ □□□□ □□□□□□ □□□□□□ □□□, □□□□□ □□□□ □□□□ Done □□□□□ □□□□□ □□□□□

Cancel Back Done

• □□□□□□ **Discharge** □□□□□□□□□ □□□□□□□ □□□ □□□□ □□□ □□□□□ □□□□□□

The form IDF-DEMOTPHL-HEE4NF7ZQMULG has been successfully 'Discharged'

Back to [Form](#) | [List](#)