

PATIENT NAME: _____ MRN: _____ DOB: _____
 YOUR NAME: _____ DATE: _____

Modified Vulnerability Index		
HOUSING STATUS:		YES/NO
Does the patient meet criteria for being "HUD Homeless"? (CHRONIC) <ul style="list-style-type: none"> • Continuously homeless for at least a year OR 4 episodes of homelessness in 3 years • Disabling condition (psychiatric illness, substance abuse or chronic disease) • Patients can be institutionalized (hospital, nursing home, jail rehab) for up to 90 days between episodes of homelessness. 		
UTILIZATION	# of ED/IP Visits	SCORE (1 point for each)
4 or more hospitalizations or ED visits in the previous 12 months? (xx/xx)		
4 or more ED visits in the previous 3 months?		
CONDITION		
Age 50 or older?		
Cirrhosis or Pancreatitis with ETOH etiology		
End-Stage Renal Disease (ESRD)		
HX of frostbite, immersion foot, hypothermia?		
Tri-morbidity: Co-occurring severe mental illness, substance abuse and chronic medical condition.		
MoCA < 23 with evidence of intellectual disability, or evidence of traumatic brain injury (TBI) (head injury, assault, loss of consciousness or periorbital fracture)?		
UNCONTROLLED OR OUT-OF-CARE DISEASE		
Asthma or COPD, with insufflation of heroin or cocaine		
Diabetes with end-organ damage, extremity amputation or necrosis		
Seizure Disorder		
HIV+/AIDS not virally suppressed?		
Heart Failure with low Ejection Fraction (EF)?		
Head, Neck or Breast Cancer?		
VULNERABILITY INDEX TOTAL:		
ADDITIONAL INFORMATION		YES/NO
Pregnant?		
HX of interpersonal violence (IPV) or Domestic Violence (DV)?		
Language other than English? (list to right ->)		
Veteran? Consider referring to the VA's Ending Veteran's Homelessness program		
Undocumented Immigration Status?		
Capable of independent living?		
Stage of Change? Exclusion: precontemplative		