

McLaren Print System Order

Order No: 45409
Order Date: 2019-05-15
User: Susan Hillger
Phone: 248-866-2048

Ship Location: McLaren NRI (attn: Doris Duncan)
G-3239 Beecher
Flint, MI 48532

Forms

Quantity: 500
Paragon Dept No: 38260
Dept Name: McLaren NRI
Company Number: 60

Order Total Price: 0.00

Item Number: 17620
Item Description: Post Evaluation Summary and Treatment Plan
Revision Date: 9/2010
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill: None
Misc Info:

McLaren Flint
Flint, MI
NEUROLOGIC REHABILITATION INSTITUTE
POST EVALUATION SUMMARY & TREATMENT PLAN

DATE OF EVALUATION: _____
 PATIENT NAME: _____
 DIAGNOSIS: _____
 TEAM LEADER: _____

POST EVALUATION SUMMARY:
 The following services are recommended:

	Frequency/Duration:	Signature	Date
Social Work	_____	_____	_____
Speech Language Pathology	_____	_____	_____
Physical Therapy	_____	_____	_____
Occupational Therapy	_____	_____	_____
Recreational Therapy	_____	_____	_____

Rancho Los Amigos Scale of Cognitive-Function Level: _____
 Recommended Referrals/Consultations: _____

 Safety Concerns/Recommended Restrictions: _____

 Barriers to Treatment: _____

Spec Info: Orientation Stroke Education Brain Injury Education
 Support Groups _____ _____

Discharge Plan: _____
 Anticipated DIC Date: _____
 Anticipated Community Resource Needs: _____

POST EVALUATION SUMMARY & TREATMENT PLAN
 17620-001-001

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