

McLaren Print System Order

Order No: 55183 Reprint Previous Order No: 22160
 Order Date: 2020-07-06
 User: Samantha Larr
 Phone: 810-342-5963

Ship Location: McLaren Flint 4N IPR Attn: Samantha
 401 S Ballenger Hwy
 Flint, MI 48532

Forms

Quantity: 500
 Paragon Dept No: 91120
 Dept Name: IPR
 Company Number: 60

Order Total Price: 0.00

Item Number: M-28047
 Item Description: Rehabilitation Conference Report
 Revision Date: 6/2020
 Print: 2 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: None
 Misc Info: ds black

<input type="checkbox"/> Individual POC Team Conference <input type="checkbox"/> IED Family Conference		McLAREN FLINT REHABILITATION CONFERENCE REPORT	
IMPAIRMENTS _____ HOME ENVIRONMENT _____			
ACTIVITY			
OCCUPATIONAL THERAPY Feeding _____ Grooming _____ Oral Hygiene (dentures 1/1N) _____ Goal _____ Bathing Upper Body _____ LB _____ Dressing Upper Body _____ LB _____ Footwear on/off _____ Tub/Shower Transfer _____ Toilet Transfer _____ Tubbing _____ Family Training _____ Equipment _____ LTO _____ LTO _____ Comments _____ OT Signature _____ Date & Time _____		PHYSICAL THERAPY Roll supine L/R _____ Sit supine _____ Supine roll _____ Sit to Stand _____ Chair to bed _____ Car Transfer _____ Goal _____ Ambulation _____ Able to walk _____ 10 ft 1/1N Amt. of assist needed _____ 10 ft on uneven surface 1/1N Amt. of assist needed _____ 50 ft with 2 turns 1/1N Amt. of assist needed _____ 100 ft 1/1N Amt. of assist needed _____ Stairs _____ Amt. of assist to get up 1 step (width) _____ 4 steps _____ 1/1 steps _____ R/L _____ Balance _____ Amt. of PB to pick object up from floor while standing _____ B/C Mobility _____ Able to wheel 100 ft w/2 turns 1/1N Amt. of assist _____ 100 ft 1/1N Amt. of assist _____ BR Bearing Status _____ Family Training _____ Equipment _____ LTO _____ LTO _____ Comments _____ PT Signature _____ Date & Time _____	
SPRUCH THERAPY Swallow Diet _____ Cognition/Language _____ Education/Training _____ LTO _____ LTO _____ SLP Signature _____ Date & Time _____			

