Intake and Treatment Plan

Mr.(=check) :

ID nr. :   **D.o.b.:**

Referred by:	Dr. (Last Name, specialty)	**Incident d.d.:** (check)		
1ᵉ Consult d.d.:	March 09, 2014	**Complaints since:**		
Ref. Diagnosis:	*In a few words: referral text*	**Physiatrist:**		A.C. Hagedoorn

Clinical History: *in shorthand-style (chronological): how would you refer this case (with the patient present!) in max. 1 min. to a colleague within the rehab team: why is the patient with us (when/what happened, what is limiting him/her/fam., what is the root cause etc.); in other words, what is the story of the patient, "medically translated"; **and**: (in max 5 words) what are we going to do with the pat. (e.g.: "brief behavior modification training")?*

Relevant Earlier History: *in chronological order: other relevant medical facts and problems (e.g., diabetes, hypertension, surgeries not-directly related to the current problem, etc.: {[month/year], D/ HTA; [year], appendectomy}).*

Current $\mathcal{R}/$: *(name medicine; name medicine)*

Patient's / pat. system's Goals: " ". *(in "shorthand", and, if possible, as expressed by the patient and/or family)*

Physical Exam: *(just the relevant details that stand out (both pathological and "exceptionally normal" findings …), systematical: e.g., top to bottom and/or L/R, and/or body parts).*

Rehab Diagnosis:	*(Think Impairments, Disabilities, Handicap!)*
Physical:	*Relevant physical impairments in basic activities like moving walking, standing, sitting; their relation with pain. If available, relevant details (in terms of impairments and disabilities) of the physical exam (don't repeat!). p.m. (in-) continence (2x); p.m. sexual act.*
ADL:	*Disabilities in dressing, toileting, bathing; the "morning routine" / daily tasks in / around the house / household; help (with what); helping aids.*
Social:	*Married / Living together; {when?!} divorced / widowed); partner good health / problems? Children (age, (#), health issues; (not) living in the same house). P.m. "network". House (type, owned/rental; toilet upstairs &/or downstairs; sleeping/bathing up/downstairs; adaptations; (large?) garden etc.). Work/profession: hrs/wk, Sick Leave or Pension %, +/- conflicts. Transport (e.g. bicycle, scootmobile, car). Hobbies?!*
(Neuro-) Psychological:	*1ˢᵗ impression of attitude, burden v. capabilities; level of suffering; neuropsychol. imp./disab./handicap (attention, concentration, memory, insight); mood, habitus (overachiever +/-); (sub?) assertivity; dexterity in dealing with challenges?*
Communication:	*Eyesight, audition, speech, understanding; reading/writing; breathing; swallowing.*

Core-Problem (Physistrists' and/or Patiënt-Coaches' professional perception)**:**

" ".*(in your own professional words, the core problem, and "the way to the solution"*

Treatment *Goals* and estimated *-Duration*:

*(**Goals**: as much as possible measurable / "accountable",including a timeline: for team members* **and** *the pat./fam.!)*

- **Short term (approx. two**(=check) **weeks):** *(what to attain / what is needed at 1ˢᵗ consult / team meeting?!)*
- **Intermediate term (approx. six**(=check) **weeks):** *(what to attain / what is needed towards the end of this rehab?!) (e.g.)* max. possible reduction of current impairments and disabilities; handles his issues *(to what extent?!)* independently; further goals (pat., family); (what, where) self-directed further training; possibly, transfer of care to?
- **Longer term (three more months):** *(goals!, and/or)* when / how often, future visits and coaching at the rehab clinic.

Behandel plan:	*(in the following fields, structure / "big picture" / what is going to be done: understandable for pat./fam., referring Dr.(s) and team members)*	**Freq:** (per wk)
Fysiotherapie:	*(whát does the PT do at the start, during-,and towards the end of treatment; if relevant, in a coordinated team-effort with-)*	?x
Occ. therapy:	*(same, OT)*	?x
Social Work:	*(same, SW)*	? pp
Klin. Psychology:	*(same, PSy)*	? pp
Speech ther.	*(same, Breath/Relax.Ther., Dietician, Speech therapist)*	
Orth/Prosth.:	*(same, Orth. / Prosth.; Orthop Shoemaker)*	

Report Date: August 17ᵗʰ, 2014
Responsible: Armand C. Hagedoorn, Physiatrist
              (name), Patiënt- Coach

c.c.: Dr.
      Dr.

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