**Treatment Plan Outline**

Patient: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Occupational Performance Deficit**(problem and causes: client factors, skills, patterns, context) | **Short Term Goals** (Measurable, time frame, level of assistance—see note) | **OT Intervention Strategies** (Include type of OT intervention, time to complete, position of patient, environment intervention) | **Grading** (Up or down) | **Rationale**(Include theory applied, clinical reasoning for plan, evidence based) |
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