National Burns ODN Group the nationally aligned clinical and management group for specialised burns ODNs

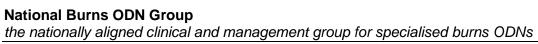


| Adult Burns Rehabilitation | Prescription | Insert Pa |
|----------------------------|--------------|-----------|
|----------------------------|--------------|-----------|

| l | Insert Patient ID or label |
|---|----------------------------|
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Core Information

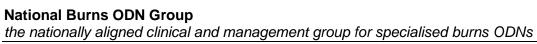
| GP: | | Date of Injury: |
|---|-------------------|-------------------------------|
| | | |
| Burn Service: | Current Location: | Key Worker/Lead Professional: |
| | | • |
| | | |
| Clinical History: | | |
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| Medications: | | |
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| Common of Internations to de | | |
| Summary of Interventions to da | ite: | |
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| | | |
| Progress, Management and Con | nplications: | |
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| | | |
| Pre-Injury / Illness information (including social situation, housing, vocation, roles and leisure: | | |
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Summary

| Rehabilitation Goals (including predicted time frame) | | | | |
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| Key Management p | olan: (e.g. procedures/revi | ews awaited, advice re | e scarring, use of orthose | s |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Services Referred to | o: (including contact detail | s and anticinated wait | ring time) | |
| Services Referred to | or finding contact actain | o and anticipated tran | g tille/ | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Acute Pain | /needed Chronic Pain | Doughistry | Orthotics | |
| Team | Team | Psychiatry | Orthotics | |
| Physiotherapy | ОТ | Social | Psychology | |
| Speech & | Ophthalmology | Service Dietitian | Other | |
| Language | | | | |
| Referrals required I | эу G.Р.: | | | |
| | | | | |
| | | | | |
| | | | | |
| Other March 1 | | *.b | 1 2 | |
| | tion: (e.g. patient/family w | rishes, potential discha | arge barriers, | |
| Other Key informat immigration/reside | | rishes, potential discha | arge barriers, | |
| | | rishes, potential discha | arge barriers, | |





| Name: | Designation: | Signed: | Date: |
|-------|--------------|---------|-------|