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Priority		evel of Assista	nce Initials	Priority	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	vel of Assist	ance	Initials	Priority	Level of Assistance	In	itials
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	Transfer	bility		_				H		Memory/Cognitive Comprehension		
E	Ambulat	ion			UE				-	Expression		
-	Distance	2								Articulation	_	
-	Nevice -				Cognition/Pe	erception	ti			Intelligibility	_	1
	Exercise	95	Reps			_	-			Swallow Techniques	_	
	Pain at an acceptable level prior to and after treatment					Pain at an acceptable level prior to and after treatment ☐ No* ☐ Yes						
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	ority H		Medium L=Lov	v *= Ref	fer to VIE note	25						
Lev	el of Assis	tance 1 = Depen	dent 2 = Max assis	3 = Mod a	935ist 4=1	Min assist	= Stand	by assist 6	= Independer	It with device 7 = Complete independ	ence	
-LY: Add	ress E	ach Patien	t Problem (Al	active pro	blems on p	oroblem lis	- doc	cument pro	gress to g	oals / outcomes identified.)		
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