

Daily Goals Worksheet #4

Name:	Room Number	Date	Needs	Needs Met	DRG Expected Length of Stay:
Anticipated Discharge Date:		Diagnosis:			Follow - Up
Nutrition: Appropriate diet, bowel regimen, fluid status, Albumin levels, Pre albumin levels	Recommendations:				
Social Work: Psychosocial issues to address, Advanced Directives, Travel needs, Emotional/spiritual needs, Family updated	Recommendations:				
Respiratory Therapy: O2 demands, nebulizers, flutter valve, IS, Readiness to Wean	Recommendations:				
Pharmacy: DVT Prophylaxis, Cultures, Drug Levels, Glucose control, Med changes, SUD Prophylaxis	Recommendations:				
Provider: Tests, Procedures, AM Labs and CXR, Consultations, Code Status,	Recommendations:				
Nursing: Neuro Status, Pain Management, Sedation, Safety Risks, Telemetry Continuation, D/C catheters or tubes, Skin Care addressed, HOB elevated 30 deg. General Care	Recommendations:				
PT/OT: Mobilization, OOB, ROM, Rehab needs	Recommendations:				
UR: Severity of illness/Intensity of service	Recommendations:				
Other Information:					