

# Rehabilitation Plan

<b>Rehabilitation Plan for</b>	<i>Name</i>	
Outcome Goals:	Date to be Achieved:	
Return to full operation and tasks		
Immediate Goals:	Date to be Achieved:	
Obtain doctors certificate		
Review any special requirements from the doctor		
Identified tasks that (Name) can perform		

Steps / Action	Action Rehabilitation Manager / Employee	Date	Cost	Review Date
Employee can perform the following tasks only				
Discuss rehabilitation plan	Manager/Employee			
Return restricted task List only				
Discuss rehabilitation plan	Manager/Employee			
Return to full work				
Medical Clearance from doctor				
Sign off by Manager/Employee				

Manager: \_\_\_\_\_

Employee: \_\_\_\_\_