Best Case/Worst Case: ICU

What things may look like going forward.

Pt Initials: _____
Room Number: _____

★

*Best Case
Scenario*

Hopes

Range of What is Possible

Worries

⬛

*Worst Case
Scenario*

Date: Event:	Date: Event:	Date: Event:	Date: Event:	Date: Event:

_____ Enjoys:
(Patient Name)