

SYNTHETIC LIFE CARE PLAN

Prepared for Baby E. Example (SYNTHETIC)

E. Example v. Sample Medical Center (SYNTHETIC)

Prepared by SYN Example Planner, RN, CLCP (SYNTHETIC)

Date of plan: 08/01/2026

This plan is invented for a work sample. It is the input to the traceability audit, not an audit product. Every name, figure and recommendation is fictional.

1. Records reviewed

1. NICU discharge summary, SYN Example Children's Hospital NICU, 06/20/2024
2. Brain MRI report, SYN Example Children's Hospital Radiology, 06/14/2024
3. Pediatric neurology recommendation letter, N. Example, MD, pediatric neurology (SYNTHETIC), 05/12/2026
4. Pediatric neurology clinic note, N. Example, MD (SYNTHETIC), 05/12/2026
5. Physiatry recommendation letter, R. Sample, MD, physical medicine and rehabilitation (SYNTHETIC), 04/28/2026
6. Physiatry clinic note (botulinum toxin), R. Sample, MD (SYNTHETIC), 04/28/2026
7. Pediatric gastroenterology recommendation letter, G. Example, MD, pediatric gastroenterology (SYNTHETIC), 03/30/2026
8. Pediatric gastroenterology clinic note, G. Example, MD (SYNTHETIC), 03/30/2026
9. Pediatric orthopedic clinic note, T. Sample, MD, pediatric orthopedics (SYNTHETIC), 02/17/2026
10. Pulmonology recommendation letter, P. Sample, MD, pulmonology, letter dated 06/02/2026
11. Pediatric ophthalmology note, V. Example, MD, pediatric ophthalmology (SYNTHETIC), 01/22/2026
12. Speech-language and feeding evaluation, S. Sample, MS, CCC-SLP (SYNTHETIC), 03/05/2026
13. Complex care clinic note, C. Example, MD, complex care pediatrics (SYNTHETIC), 06/09/2026
14. Pharmacy medication profile, SYN Example Pharmacy, 06/30/2026
15. Family interview, 07/10/2026
16. Home visit, 07/10/2026

2. Method

Items are grouped by category. Frequency and duration are stated for each item. Unit costs are from the sources named in each row. Recommending sources are named in the last column.

3. Diagnoses

P91.63 Severe hypoxic ischemic encephalopathy [HIE]

G80.0 Spastic quadriplegic cerebral palsy

G40.909 Epilepsy, unspecified, not intractable, without status epilepticus

R13.12 Dysphagia, oropharyngeal phase

Z93.1 Gastrostomy status

4. Summary of current function

Nonverbal. Nonambulatory. Dependent for all mobility, feeding, bathing and dressing. Fed by gastrostomy. Uses eye gaze to indicate choices. Seizures controlled with occasional breakthrough.

5. Plan items (1 to 8)

No.	Category	Item	Frequency	Duration	Unit cost	Cost source	Recommended by
1	Physician care	Pediatric neurology follow-up visit	4 per year	Lifetime	\$285.00	SYN Example Children's Hospital price list	N. Example, MD letter 05/12/2026
2	Physician care	Physiatry follow-up visit	2 per year	Lifetime	\$310.00	SYN Example Children's Hospital price list	R. Sample, MD letter 04/28/2026
3	Physician care	Pediatric gastroenterology visit	2 per year	To age 18	\$295.00	SYN Example Children's Hospital price list	G. Example, MD letter 03/30/2026
4	Physician care	Pediatric orthopedic visit	1 per year	To age 18	\$260.00	SYN Example Children's Hospital price list	T. Sample, MD note 02/17/2026
5	Physician care	Pediatric ophthalmology exam	1 per year	Lifetime	\$240.00	SYN Example Eye Institute fee schedule	V. Example, MD note 01/22/2026
6	Physician care	Pulmonology visit	2 per year	Lifetime	\$300.00	SYN Example Children's Hospital price list	P. Sample, MD letter 06/02/2026
7	Physician care	Complex care clinic visit (includes well-child care)	6 per year	To age 21	\$275.00	SYN Example Children's Hospital price list	C. Example, MD note 06/09/2026
8	Physician care	Genetics consultation	One time	One time	\$520.00	SYN Example Children's Hospital price list	Planner recommendation

5. Plan items (9 to 16)

No.	Category	Item	Frequency	Duration	Unit cost	Cost source	Recommended by
9	Therapies	Physical therapy	3 per week	To age 18	\$145.00	SYN Regional therapy survey (planner)	R. Sample, MD letter 04/28/2026
10	Therapies	Occupational therapy	2 per week	To age 18	\$145.00	SYN Regional therapy survey (planner)	R. Sample, MD letter 04/28/2026
11	Therapies	Speech-language and feeding therapy	1 per week	To age 18	\$150.00	SYN Regional therapy survey (planner)	S. Sample, SLP evaluation 03/05/2026
12	Therapies	Hippotherapy	1 per week	Age 3 to 18	\$120.00	SYN Example Equestrian Center quote	Planner recommendation
13	Therapies	Aquatic therapy	1 per week	Age 3 to 18	\$110.00	SYN Regional therapy survey (planner)	R. Sample, MD letter 04/28/2026
14	Therapies	Botulinum toxin injections, lower limbs	4 per year	To age 18	\$1,850.00	SYN Example Children's Hospital price list	R. Sample, MD letter 04/28/2026
15	Diagnostics	Routine EEG	1 per year	To age 18	\$980.00	SYN Example Children's Hospital price list	N. Example, MD letter 05/12/2026
16	Diagnostics	Brain MRI	One time	At about age 5	\$3,200.00	SYN Example Children's Hospital price list	N. Example, MD letter 05/12/2026

5. Plan items (17 to 24)

No.	Category	Item	Frequency	Duration	Unit cost	Cost source	Recommended by
17	Diagnostics	Antiseizure drug level, CBC and metabolic panel	2 per year	Lifetime	\$190.00	SYN Example Lab fee schedule	N. Example, MD letter 05/12/2026
18	Diagnostics	AP pelvis X-ray (hip surveillance)	1 per year to age 8, then every 2 years	To age 18	\$160.00	SYN Example Children's Hospital price list	T. Sample, MD note 02/17/2026
19	Diagnostics	Spine X-ray (scoliosis surveillance)	1 per year	Age 8 to 18	\$175.00	SYN Example Children's Hospital price list	T. Sample, MD note 02/17/2026
20	Diagnostics	Videofluoroscopic swallow study	1 per year	To age 10	\$640.00	SYN Example Children's Hospital price list	G. Example, MD letter 03/30/2026
21	Medications	Levetiracetam oral solution	Daily	Lifetime	\$38.00	SYN pharmacy price survey, per month	N. Example, MD letter 05/12/2026
22	Medications	Intranasal rescue benzodiazepine	4 doses per year	Lifetime	\$310.00	SYN pharmacy price survey, per dose	N. Example, MD letter 05/12/2026
23	Medications	Baclofen oral	Three times daily	Lifetime	\$42.00	SYN pharmacy price survey, per month	R. Sample, MD letter 04/28/2026
24	Medications	Omeprazole suspension	Daily	To age 18	\$55.00	SYN pharmacy price survey, per month	G. Example, MD letter 03/30/2026

5. Plan items (25 to 32)

No.	Category	Item	Frequency	Duration	Unit cost	Cost source	Recommended by
25	Nutrition	Pediatric enteral formula	About 1,000 mL daily	Lifetime	\$620.00	SYN home infusion supplier quote, per month	G. Example, MD letter 03/30/2026
26	Nutrition	Enteral feeding pump and monthly supplies	Pump every 5 years; supplies monthly	Lifetime	\$285.00	SYN home infusion supplier quote, per month	G. Example, MD letter 03/30/2026
27	Nutrition	Gastrostomy button replacement	2 per year	Lifetime	\$450.00	SYN home infusion supplier quote	G. Example, MD letter 03/30/2026
28	Equipment	Bilateral ankle-foot orthoses	1 pair per year	To age 18	\$2,400.00	SYN Example Orthotics quote	R. Sample, MD letter 04/28/2026
29	Equipment	Custom tilt-in-space wheelchair with seating	Every 5 years	Lifetime	\$9,800.00	SYN Example Mobility quote	R. Sample, MD letter 04/28/2026
30	Equipment	Adaptive stroller	Every 3 years	To age 10	\$3,100.00	SYN Example Mobility quote	R. Sample, MD letter 04/28/2026
31	Equipment	Supine stander	Every 5 years	To age 18	\$4,200.00	SYN Example Mobility quote	R. Sample, MD letter 04/28/2026
32	Equipment	Adaptive bath chair	Every 5 years	Lifetime	\$1,650.00	SYN Example Mobility quote	R. Sample, MD letter 04/28/2026

5. Plan items (33 to 40)

No.	Category	Item	Frequency	Duration	Unit cost	Cost source	Recommended by
33	Equipment	Enclosed pediatric safety bed	Every 10 years	Lifetime	\$11,500.00	SYN Example Medical Supply quote	P. Sample, MD letter 06/02/2026
34	Equipment	Eye-gaze speech-generating device	Every 5 years	Lifetime	\$15,800.00	SYN Example AAC vendor quote	S. Sample, SLP evaluation 03/05/2026
35	Equipment	Portable suction machine	Every 5 years	Lifetime	\$780.00	SYN Example Medical Supply quote	P. Sample, MD letter 06/02/2026
36	Home care	Attendant care	16 hours per day	Lifetime	\$34.00	SYN home care agency survey, per hour	Family interview
37	Home care	Nurse case management	12 hours per year	Lifetime	\$125.00	SYN case management survey, per hour	C. Example, MD note 06/09/2026
38	Education	Teacher of the visually impaired consultation	1 per school year	Age 3 to 21	\$400.00	SYN school district rate (planner)	V. Example, MD note 01/22/2026
39	Home and transport	Home modification (accessible bathroom and ramp)	One time	One time	\$68,000.00	SYN Example Builders estimate	Planner recommendation
40	Home and transport	Wheelchair-accessible van conversion	Every 7 years	Lifetime	\$32,000.00	SYN Example Mobility Vans quote	Planner recommendation

6. Planner statement

The recommendations in this plan are based on the records reviewed, the family interview and the home visit, and on my experience as a life care planner. (SYNTHETIC)

SYN Example Planner, RN, CLCP (SYNTHETIC) Dated 08/01/2026