



Ideal
HOME HEALTH

Fax: (718) 732-2516



CAREGIVER / DUTY SHEET

EMPLOYEE:

PT ADDR

PATIENT:

PT ADDR

PATIENT SIGN	EMPLOYEE SIGN		DATE	TIME IN	TIME OUT	TOTAL
X	X	MON	/	:	:	:
X	X	TUE	/	:	:	:
X	X	WED	/	:	:	:
X	X	THU	/	:	:	:
X	X	FRI	/	:	:	:
X	X	SAT	/	:	:	:
X	X	SUN	/	:	:	:

Personal Care: Total Care(103)	Assist	MO	TU	WE	TH	FR	SA	SU	TREATMENTS	MO	TU	WE	TH	FR	SA	SU
Bath(100)	Shower(101)								Take Temperature(400) Oral							
	Bed(102)								Axillary							
Mouth Care/Denture(106)	Dressing (111)								Take Pulse(403)							
Hair Care: Comb(107)	Shampoo(108)								Take Respirations(404)							
Shave(109)	Nails(do not cut) (110)								Take Blood Pressure(405)							
Skin Care(112)	Foot Care(113)								Assist With Catheter Care(408)							
Toileting: Diaper(114)	Commode(115)								Empty Foley Bag (409)							
Toileting: Bedspan/Urinal(116)	Toilet(117)								Assist With Ostome Cary(410)							
Nutrition: Diabetic(534)	Low Fat(532)								Remind To Take Medication(411)							
Nutrition: Regular(529)	Low Salt(530)								SUPPORT ACTIVITIES	MO	TU	WE	TH	FR	SA	SU
Soft Diet (538)									Change Bed Linen(500)							
Prepare: Breakfast(202)	Snack(205)								Patient Laundry(501)							
Prepare: Lunch(203)	Dinner(204)								Light Housekeeping(502)							
Assist With Feed(206)									Patient Care Equipment(505)							
Record Intake: Food(207)	Fluid(208)								Shopping(506)							
Assist With Walking(301)									SAFETY	MO	TU	WE	TH	FR	SA	SU
Device Used: Wheelchaire	Cane (302)								ACCOMPANY TO MED. APPT.(508)							
Device Used: Walker	Crutches (302)								MONITOR PAT.SAFETY (511)							
Hoyer Lift (302)									Bleeding Precaution(541)							
Hospital Bed (302)									Seizures Precaution(540)							
Activity: Transferring(300)									Oxygen Precaution(543)							
Turning/Positioning (At least every 2 hours) (311)									Fall Precaution(539)							
OTHER SPECIFY		MO	TU	WE	TH	FR	SA	SU	Wander Risk							
Code:									Sharp Precaution (545)							
Code:									Standard Precaution (542)							