Care records from

Your Agency Name

These pages stay in the home. Everyone who helps, the family and our caregivers, writes on the same sheets, so the next person knows what happened.

About this binder	
Client name	
Address	
Agency office phone	
After-hours phone	
Care coordinator	
Main family contact and phone	
Doctor and phone	
Pharmacy and phone	

What is in here

- **Caregiver visit log:** who came, when, and what was done.
- **Daily care log:** meals, sleep, mood, bathroom and anything new.
- **Medication log:** a record of what was taken, as the doctor, pharmacist or label says.
- **Shift handoff sheet:** what the next person needs to know.

Print more pages whenever you need them. These pages are records only, not medical advice. For medicines, doses and symptoms, ask the doctor, nurse or pharmacist.

Caregiver visit log

One line per visit. Write the times as they happened, and what was done in your own words.

Date	Caregiver	Time in	Time out	What was done	Notes for the family or office	Initials

Daily care log

Day	
Date	
Logged by	

Meal	What was eaten	How much (all, some, none)
Breakfast		
Lunch		
Dinner		
Snacks and drinks		

Today	Notes
Sleep last night	
Mood today	
Bathroom	
Activity, walks, exercises	
Bathing, dressing, grooming	
Visitors and calls	
Anything new or different	
Pass on to the next person	

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Daily medicine log

Week of: _____ · Write each medicine when it is given. Times and directions come from the label, doctor or pharmacist.

Date	Time given	Medicine name	Prescriber	Given by	Given, skipped or refused	Notes

Shift handoff

Handoff	
Date and time	
From	
To	

Topic	Notes
How they were today	
Medicine log filled in? (yes or no)	
Eating and drinking	
Changes noticed (also on the symptom log)	
Appointments or visits coming up	
Calls made or waiting on	
Supplies running low	
Promised to do (and for whom)	
Questions for the next person	

Anything else