LOVE RESPECT AND CARE

5907 PENN AVE. PITTSBURGH, PA 15206 **Phone** 412-362-0657 **Fax** 412-362-1680

Emp. ID #:															
PP:// to//	SUN		MON		TUES		WED		THURS		FRI		SAT		
DATE:															
**The second box is for split shift	AM /	AM/	AM /	AM /	AM /	AM /	AM /	AM/	AM /	AM/	AM /	AM	AM /	AM/	
purposes only** TIME IN:	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	/PM	PM	PM	
THVIL IIV.															
**The second box is for split shift	AM /	AM/	AM /	AM /	AM /	AM /	AM /	AM/	AM /	AM/	AM /	AM/	AM /	AM/	
purposes only** TIME OUT:	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	PM	
THIVE OUT.															
TOTAL HOURS:															
TASKS:	Please	put a	n (x) in a	any box	that ap	plies to	the task	s that	you hav	<mark>/e perf</mark>	<mark>rmed t</mark>	<mark>hat da</mark> y	<u>/</u>		
BATHING: SHOWER/ BED															
BATH	<u> </u>						1						<u> </u>		
DRESSING													<u> </u>		
GROOMING: ELEC. SHAVE or NAIL CARE															
HAIR CARE															
ORAL CARE															
SKIN CARE															
TOILETING/BEDSIDE															
COMMODE/ EMPTYING CATHETER BAG	 												 		
TRANSFERRING	 						<u> </u>				 		 		
WALKING/ CLIMBING STAIRS	 						1				 		 		
MEAL PREP. Or ASST. WITH	 												 		
EATING															
ASSIST WITH MEDICATION															
LAUNDRY															
CHANGE BED LINEN															
DUSTING															
MOPPING															
VACUUMING/ SWEEPING															
CLEAN STOVE OR															
REFRIGERATOR	<u> </u>												↓		
DISHES													<u> </u>		
ERRANDS/ SHOPPING													<u> </u>		
COMPANIONSHIP	<u> </u>												<u> </u>		
Employee name:				Consumer Name											
Employee Signature						Consumer Signature									
Management Approval Date MANAGEMENT ON										ONLY_					