

INDIVIDUAL CARD FOR NURSING AND CARE ACTIVITIES

First name, last name

.....

.....

Stamp of the entity and the date

Personal support worker

.....

.....

Card number

| | Date | Date | Date | Date | Date | Date | Date |
|--|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| | Time and signature | Time and signature | Time and signature | Time and signature | Time and signature | Time and signature | Time and signature |
| Skin care procedures | | | | | | | |
| Full body toilet | | | | | | | |
| Partial toilet of the body | | | | | | | |
| Oral hygiene/prosthesis | | | | | | | |
| Shaving/brushing | | | | | | | |
| Hand/foot nails | | | | | | | |
| Change of underwear | | | | | | | |
| Combing hair, care/cosmetics for the head and face | | | | | | | |
| Rinse eye/wounds | | | | | | | |
| Administering fluids | | | | | | | |
| Water balance | | | | | | | |
| Feeding | | | | | | | |
| Assistance with feeding | | | | | | | |
| Tube feeding | | | | | | | |
| Dietetic education | | | | | | | |
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|-----------------------------------|--|--|--|--|--|--|--|
| Breathing gymnastics | | | | | | | |
| Patting | | | | | | | |
| Changing the lying position | | | | | | | |
| Activation – movement exercises | | | | | | | |
| Hoppe method gymnastics | | | | | | | |
| Help with standing up and walking | | | | | | | |
| Gymnastics in a sitting position | | | | | | | |
| Making the bed | | | | | | | |
| Change of bed linen | | | | | | | |
| Change of sheets | | | | | | | |
| Duck/pool serving | | | | | | | |
| Leading to the toilet | | | | | | | |
| Changing nappies | | | | | | | |
| Changing the urine bag | | | | | | | |
| Stoma bag replacement | | | | | | | |
| Replacing the undercoat | | | | | | | |
| Airing | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Dressing up | | | | | | | |

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|---|--|--|--|--|--|--|--|
| Help with dressing | | | | | | | |
| Undressing | | | | | | | |
| Help with undressing | | | | | | | |
| | | | | | | | |
| Bath in the tub | | | | | | | |
| Washing under the shower | | | | | | | |
| Washing the head | | | | | | | |
| Skin care | | | | | | | |
| Education on the prevention of pressure ulcers | | | | | | | |
| Dressing change | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Help with the administration of drugs | | | | | | | |
| Collection of material for laboratory and microbiological tests <i>(enter what)</i> | | | | | | | |
| | | | | | | | |
| Registration of bedsores – grade | | | | | | | |

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|---|--|--|--|--|--|--|--|
| 0 – none, healthy skin I – fading redness II – redness not blushing III – damage to all layers of the skin to the border with the subcutaneous tissue IV – the damage involves the skin and subcutaneous tissue V – necrosis | | | | | | | |
|---|--|--|--|--|--|--|--|

Notes and observations: