

FRANCISCAN EVER THERE CARE

273 Finch Avenue, Meriden, CT 06451

(203)630-2881

P.C.A. DAILY CARE REPORT

Name of Client _____ PCA Signature _____

Address _____ WEEK ENDING _____

	Su	M	T	W	Th	F	S		Su	M	T	W	Th	F	S
Complete SpongeBath								Bedpan/Commode/Toilet							
Partial Sponge Bath								Ambulation							
Shower								Repositioning/Bed							
Mouth Care								Exercises							
Denture Care								Fluids offered/given							
Peri-Care								Meal Prep							
ROM(range of motion)								Medication Reminder							
Foot Care								Clean Kitchen/mop floor							
Foot Soak								Clean Bath/mop floor							
Back Rub								Change Sheets/ Laundry							
Shampoo								Dust							
<i>Electric Razor only</i> Shave								Vacuum							
Clean Fingernails															
File Fingernails															
Comb/brush hair															
Help Dress/Undress															
In & Out of Bed/Chair															

Day	Date	TIME START	TIME FINISH	TOTAL HRS	AUTHORIZED SIGNATURE
SUNDAY					
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					