First Priority Home Care,LLC

	PCA Weekly Notes			Week of:				
(F)	Patient Name:	Patient Name:			Aide Name:			
***	Patient Signature				Aide Signature:			
				TUE	WED			
PO Box 23781	DATE							
Columbia, SC 29224	TIME IN							
·	TIME OUT							
803-661-8805	TOTAL HOURS:							
DUE EVERY MONDAY	BATHING:							
BY 12:00PM	TOTAL BED BATH							
FAX# 803-832-1643	ASSIST BED BATH							
fphctimesheets@gmail.com	ASSIST SHOWER							
	ASSIST TUB							
(Use Black Ink Only)	PERSONAL CARE							
PCA COMMENTS:	SHAMPOO/HAIRCARE							
	MOUTH CARE							
	SKIN CARE							
	ASSIT W/DRESSING							
	SHAVE							
	NAIL CARE							
	PERICARE							
	MOBILITY							
	ASSIST W/AMBULATION							
	ASSIST TO BED							
	ASSIST W/TURNING							
	NUTRITION							
	DIET: REGULAR							
	LOW NA							
	DIABETIC							
	OTHER							
	PREPARE MEAL							
	SERVE MEAL							
	ASSIST W/FEEDING							
OFFICE LICE ONLY	ENCOURAGE FLUIDS							
OFFICE USE ONLY	OTHER							
REVIEWED BY:	TOILET/ELIMINATION							
DATE: TOTAL PC2 HRS	URINAL/BEDPAN/TOILET EMPTY CATHETER BAG							
TOTAL PC1 HRS	INCONTINENT CARE							
TOTAL COM HRS	LAST BOWEL MOVEMENT							
TOTAL DDSN HRS	DATE:							
TOTAL VA HRS	OTHER							
	HOUSECLEANING							
	LAUNDRY							
	CLEAN BEDROOM							
	CLEAN BATHROOM							
	CHANGE/MAKE BED							
	CLEAN KITCHEN							
	WASH DISHES							
	VACUUM/SWEEP							
	GROCERY SHOPPING							
	CLIENT/AIDE INITIAL							
CLOCK ERRORS		ACTUAL CARE CALL HOURS ON LEDGER:						
Hours will be calculated according to		OFFICE USE ONLY - DO NOT WRITE BELOW (ADMIN)						
CareCall ledger (if applicable).								
Remember to clock in and out correctly!								