

Caregiver daily log

One sheet per day. Whoever is with them fills it in, so the next person knows how the day went.

Date _____

Caregiver _____

Arrived _____

Left _____

Medicines given

Time	Medicine and dose	Given?	Initials

Meals and drinks

	What and how much	Ate: all / some / none
Breakfast		
Lunch		
Dinner		
Snacks		
Drinks		

Personal care and activity

- | | | | |
|--|--|--|------------------------------------|
| ☐ Washed / bath | ☐ Toilet / continence | ☐ Walk / exercise | ☐ Housework |
| ☐ Dressed | ☐ Teeth / dentures | ☐ Nap | ☐ Errands |

How they seemed (mood, sleep, pain, confusion)

To pass on: falls, new symptoms, supplies running low
