

Maintenance

CLIENT CARE PLAN

Client: *Pathways , CarePlan

Client ID#: 1165425300
 Admission Date: 12-06-2006

41 Health Care Supervision Potential Problem Individual

Admission Rating **K** **B** **S**
 Desired Outcome **K** **B** **S**

<i>Cat.</i>	<i>Target</i>	<i>Care Description Note</i>
TGC	Medication Action/Side Effects	Other Teach 1) New or changed meds 2) Review med regime 3) Side effects or interactions 4) Pt understanding 5) Compliance
S	Signs/Symptoms-Physical	Other Assess 1) CV status 2) Vital signs 3) Weight 4) Safety 5) Ability to manage at home
CM	Paraprofessional/Aide Care	Other 1) Supervise HHA/HSA q 14 or 60 days 2) Review HHA/HSA careplan & assignment sheet monthly & PRN
TP	Personal Hygiene	Other Footcare, trim toenails PRN