

## Client Progress Notes (UHC)

Consumer Name:		Employee Name:	
Month:	Year:	Case Manager:	

Tasks Performed (check all that apply)

Date:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
(must fill in date)																															
Housekeeping																															
Kitchen																															
Bathroom																															
Bedroom																															
Living Room																															
Dining Room																															
Laundry																															
Take out Trash																															
Attendant																															
Care																															
Bath/Shower																															
Sponge Bath																															
Skin Care																															
Dressing Assist																															
Toileting																															
Comb Hair																															
Shaving																															
Nail Care																															
Brush Teeth																															
Meal Prep Brkfst																															
Meal Prep Lunch																															
Meal Prep Dinner																															
Grocery Shopping																															
Other Shopping																															
Pharmacy Pick up																															
Med Reminder																															
Other																															
Exercise/ROM																															
Walk/Outside																															
Animal Care																															

Date:																				
Incidents																				
llness																				
Hospitalization																				
Death																				
Jnusual cuts																				
Unusual bruises																				
Change in sleep																				
Behavioral Issu	ıes/C	oncer	ns/B	arrie	rs: (c	ircle	wh	at a	арр	lies	5)									
Other commen	ts/coı																		 	 
Caregiver Signa																				
Program Manag	er Sig	ınatur	e:											_ Da	ate: _					

\*\*Please note further information in spaces below