*Charting form in this section. Other disciplines see department section or consultation section.

PART II KEY

CODE	EDUCATION NEEDS	CODE	WHO	CODE	HOW	CODE	RESPONSE
CR	COMMUNITY RESOURCES	F	FAMILY	D	DEMONSTRATION	Q	ASKED QUESTIONS
DIET	MODIFIED DIET	PT	PATIENT	MED	MEDICATION INSTRUCTION SHEET	A	ATTENTIVE VERBAL RESPONSE
D/C	PERTINENT DISCHARGE INSTURCTIONS OF CONTINUING CARE NEEDS	O	OTHER	P	PAMPHLET	DA	DEMONSTRATED ABILITY
F/D	POTENTIAL FOOD/DRUG INTERACTION			V	VERBAL INSTRUCTIONS	REF	OFFERED AND REFUSED TEACHING
Rehab	REHABILITATION TECHNIQUES			TV	VIDEO/TV	R	REQUIRES REINFORCEMENT
RES	RESPONSIBILITIES OF PATIENTS IN THEIR CARE			W	WRITTEN INSTRUCTIONS	DI UL	SEEMS DISINTERESTED UNABLE TO LEARN
EQ	SAFE & EFFECTIVE USE OF EQUIPMENT			O	OTHER	VR	VERBALIZED RECALL/ UNERSTANDING
MED	SAFE & EFFECTIVE USE OF MEDICATIONS						
RX	WHEN & HOW TO OBTAIN FURTHER TREATMENT						
PH	PERSONAL HYGIENE					N/A	NOT APPLICABLE

DATE	ED. NEEDS	INFORMATION TAUGHT	WHO	HOW	RESPONSE	SIGNATURE/TITLE

FORM # 679

(Rev. 4/97) **PATIENT/FAMILY EDUCATION RECORD**