

Name: _____ Month: _____ Year: _____ Day: _____ Date: _____

TO DO List	<input type="checkbox"/> <i>Check Off When Complete or Transfer Incompleted Tasks to Next or Other Day</i>
<input type="checkbox"/>	END OF DAY WRAP UP
<input type="checkbox"/>	<input type="checkbox"/> Check Completed "To Do's"
<input type="checkbox"/>	<input type="checkbox"/> Transfer Incomplete Tasks - Next/ Other Day
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/> Fold Page Edge at End of Day

ACTIVITY		Notes (Who, What, When, Where, How/Why)
8:00	<input type="checkbox"/>	
8:30	<input type="checkbox"/>	
9:00	<input type="checkbox"/>	
9:30	<input type="checkbox"/>	
10:00	<input type="checkbox"/>	
10:30	<input type="checkbox"/>	
11:00	<input type="checkbox"/>	
12:00	<input type="checkbox"/>	
1:00	<input type="checkbox"/>	
1:30	<input type="checkbox"/>	
2:00	<input type="checkbox"/>	
2:30	<input type="checkbox"/>	
3:00	<input type="checkbox"/>	
3:30	<input type="checkbox"/>	
4:00	<input type="checkbox"/>	
4:30	<input type="checkbox"/>	
5:00	<input type="checkbox"/>	
6:00	<input type="checkbox"/>	
6:30	<input type="checkbox"/>	
7:00	<input type="checkbox"/>	
8:00	<input type="checkbox"/>	
9:00	<input type="checkbox"/>	
	<input type="checkbox"/>	
10:00	<input type="checkbox"/>	
11:00	<input type="checkbox"/>	<input type="checkbox"/> Check Regular Appointments Schedule
12	<input type="checkbox"/>	<input type="checkbox"/> Review Tomorrows Schedule

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Incidental Memory Re-Trainer - Daily Log

Record Main / Highlight Activities During Each Time Period Throughout Day!

Who, What, When, Where, How, Why?

7:30	_____
8:00	_____
8:30	_____
9:00	_____
10:00	_____
10:30	_____
11:00	_____
11:30	_____
12:00	_____
12:30	_____
1:00	_____
1:30	_____
2:00	_____
2:30	_____
3:00	_____
3:30	_____
4:00	_____
4:30	_____
5:00	_____
5:30	_____
6:00	_____
6:30	_____
7:00	_____
8:00	_____
9:00	_____
10:00	_____

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<input type="checkbox"/>		<input type="checkbox"/> Transfer Incomplete Tasks - Next/ Other Day
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/> Fold Page Edge at End of Day
ACTIVITY		Notes (Who, What, When, Where, How/Why)
8:00	<input type="checkbox"/> Wake, Shower & Groom	
8:30	<input type="checkbox"/> Take Medications; Eat Breakfast	__Effexor 50 X <u>2</u> : __Ditropan X <u>1</u>
9:00	<input type="checkbox"/> Menu Planning	
9:30	<input type="checkbox"/>	
10:00	<input type="checkbox"/>	
10:30	<input type="checkbox"/>	
11:00	<input type="checkbox"/>	
12	<input type="checkbox"/>	
1:00	<input type="checkbox"/> Review AM Log	
1:30	<input type="checkbox"/>	
2:00	<input type="checkbox"/>	
2:30	<input type="checkbox"/>	
3:00	<input type="checkbox"/>	
3:30	<input type="checkbox"/>	
4:00	<input type="checkbox"/>	
4:30	<input type="checkbox"/>	
5:00	<input type="checkbox"/>	
6:00	<input type="checkbox"/> Review PM Log	
	<input type="checkbox"/>	
7:00	<input type="checkbox"/>	
	<input type="checkbox"/>	
9:00	<input type="checkbox"/> Review and Quiz Entire Daily Log	
	<input type="checkbox"/>	
10:00	<input type="checkbox"/>	
11:00	<input type="checkbox"/>	<input type="checkbox"/> Check Regular Appointments Schedule
12	<input type="checkbox"/>	<input type="checkbox"/> Review Tomorrows Schedule

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TO DO List		<input type="checkbox"/> <i>Check Off When Complete or Transfer Incompleted Tasks to Next or Other Day</i>
<input type="checkbox"/>		END OF DAY WRAP UP
<input type="checkbox"/>		<input type="checkbox"/> Check Completed "To Do's"
<input type="checkbox"/>		<input type="checkbox"/> Transfer Incomplete Tasks - Next/ Other Day
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/> Fold Page Edge at End of Day
ACTIVITY		Notes (Who, What, When, Where, How/Why)
8:00	<input type="checkbox"/> Wake, Shower & Groom	
8:30	<input type="checkbox"/> Take Medications; Eat Breakfast	Effexor X <u>2</u> ; Ditropan X <u>1</u>
9:00	<input type="checkbox"/> Menu Plan(Tu)__ Medication Ed.(W,Th)_	HOW MED ED????
9:30	<input type="checkbox"/> Call House to Schedule Transport Needs	
10:00	<input type="checkbox"/> P.T. Home Exercises: PACE, PACE, PACE	
10:30		
11:00	<input type="checkbox"/> Prep Lunch__ Thur : PainSensGrp-CCCV	
12:00	<input type="checkbox"/> Lunch	
1:00	<input type="checkbox"/> __ Wed : Martelli __ Thurs : CopeGroup	
1:30	<input type="checkbox"/> Tues : 1:30 Martelli/CCCV	
2:00	<input type="checkbox"/> Tues : BikeRideX20min; Wed,TH : CES	
2:30	<input type="checkbox"/> CES	
3:00	<input type="checkbox"/> __ Tues : Pool w Staff (Houseor PoolHall)	Wed : Practice Bowling with Staff
3:30	<input type="checkbox"/> __ Thurs : Complete Next Wk Sched w Staff	Thur : CHECK MEDS BEFORE HOME
4:00	<input type="checkbox"/> Tues : Complete Med Inventory with Collin	Relax Tape Other Days
4:30	<input type="checkbox"/> Thurs : Check Meds for Weekend	
5:00	<input type="checkbox"/> Dinner Prep	
6:00	<input type="checkbox"/> Eat Dinner (Sweep Floor if needed)	?GET GOAL FEEDBACK FROM STAFF?
6:30		
7:00	<input type="checkbox"/> DownTime Free Time	
8:00		
9:00	<input type="checkbox"/> Review and Quiz Entire Daily Log	
10:00	<input type="checkbox"/> MEDS (Trazedone50 X <u>4</u> ; Ditropan X 1	
11:00	<input type="checkbox"/> Review Daily Highlights (Retrain Memory	<input type="checkbox"/> Check Regular Appointments Schedule
12	<input type="checkbox"/> To remember automatically)	<input type="checkbox"/> Review Tomorrows Schedule

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TO DO List		<input type="checkbox"/> <i>Check Off When Complete or Transfer Incompleted Tasks to Next or Other Day</i>
		END OF DAY WRAP UP
		<input type="checkbox"/> Check Completed "To Do's"
		<input type="checkbox"/> Transfer Incomplete Tasks -> Another Day
		<input type="checkbox"/> Fold Page Edge at End of Day
ACTIVITY		Notes (Who, What, When, Where,How/Why)
8:00	<input type="checkbox"/> Wake, Take <u>Meds</u> : _____	
8:30	<input type="checkbox"/> Shower & Groom, Breakfast	<input type="checkbox"/> Tues: Beth Ann, Speech
9:00	<input type="checkbox"/> Do Schedule w Staff / __Mon=AbDul, Rec	
9:30	<input type="checkbox"/> Wed=Brenda, PT	
10:00	<input type="checkbox"/> Wed=MFm/ ___Thurs = Cope Group	
10:30		
11:00	<input type="checkbox"/> Hand,ArmEx's w Staff/ _Fri=Amy,OT-House ❖ ___11:30 Tues=AbDul ___11:30 Wed = Brenda	
12:00	<input type="checkbox"/> Lunch ❖ ___Thurs 12:30-1:30 =Amy House	
1:00	<input type="checkbox"/> Hand,Arm Ex's - MWF <input type="checkbox"/> Tue: MFm _Th: CopeGroup	
1:30	<input type="checkbox"/> Arm Ex's - MWF / _Th: CopeGroup	
2:00	<input type="checkbox"/> __M=CopeGroup __W=HabitGroup/ ___Tue=Amy, Apt	
2:30	<input type="checkbox"/> __M=CopeGroup __W=HabitGroup/ __T=Amy, Apt	
3:00	<input type="checkbox"/> __Tues=ROM Ex's	
3:30	<input type="checkbox"/> _Tues=ROM Ex's	
4:00	<input type="checkbox"/> Arm EX's (__self or __withStaff)	
4:30	<input type="checkbox"/> Between 5 and 7pm: Hand,Arm and WALK <input type="checkbox"/> With Staff: Review Daily Events (From this Log to Retrain Automatic Memory)	
5:00	<input type="checkbox"/> __Meds: _____; Dinner _Ex's/ Hand,Arm and WALK	
6:00	<input type="checkbox"/> Hand,Arm EX's and WALK	
6:30	___Wed=Phone Sis __Mom = Mom / EMAIL	<u>BEFORE BED</u>
7:00	<input checked="" type="checkbox"/> __ Review Daily Highlights (Retrain Memory to remember automatically)	<input type="checkbox"/> Check Regular Appointments Schedule <input type="checkbox"/> Review Tomorrows Schedule (Before Bed)
8:00		<input type="checkbox"/> Transfer Unfinished ToDo's / Fold Page
9:00	<input type="checkbox"/>	
10:00	<input type="checkbox"/>	<input type="checkbox"/>