

Time Away from Home Worksheet:

Daily Health Care Tasks and Treatments

1. Describe your daily health care tasks and treatments (For example: checking blood sugar, taking blood pressure)

TASK OR TREATMENT	WHY I DO MY TREATMENTS	HOW I WILL DO MY TREATMENTS BY MYSELF (OR SHOW/DIRECT OTHERS TO DO THEM)

2. What will happen if I do not do my treatments?

3. If I need more supplies, where will I get them and how will I pay for them?

4. Will changes in air, food, temperature, or water affect my body? Will these changes interact with medicines I am taking?

Tip: Being away from home means you may do your tasks or treatments in a less familiar place. Practice in places that are not usual for you.

