

DAY OF STUDY CHECKLIST:

- □ Room with adequate space (9' x 9'), privacy, standard wall outlet and trash can
- □ Chart and referral paperwork for the team to review
- □ Patient must be in a wheelchair and ready to be transported to the study location with portable oxygen if needed. Please temporarily disconnect tube feeding if applicable
- \Box Copy of patient's current medication list
- \Box Dentures and hearing aids should be worn by the patient to the study
- □ If the patient has a tracheostomy and can tolerate a speaking valve, please send it for use during the study
- □ Vital signs (same day): BP: _____ PULSE: ____ TEMP: ____ RESP: ____ SP0² _____

Patient's last recorded: Height: _____ Weight: _____

<u>PLEASE NOTE</u>: Resident does NOT need to be NPO nor have medications held prior to the study UNLESS the clinical and/or nursing staff feel that medications or PO intake prior to the study will impede the patient's ability to participate.