

Comfort Log

*Refer to Comfort Management or Specific Symptom section
Of child care plan*

| | Assessment Tool * | Context/ Environment/ Triggers | Interventions (see legend) | Effective | Outcome Tool | Additional Notes |
|---|---|--------------------------------|---|---|--|---------------------------------------|
| Date Time Initials | <input type="checkbox"/> Observed <input type="checkbox"/> Reported Tool: Score: | | Physical: | <input type="checkbox"/> Yes <input type="checkbox"/> No | Time: <input type="checkbox"/> Observed <input type="checkbox"/> Reported Score: | <input type="checkbox"/> See IN notes |
| | | | Psychological: | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | Pharmacological: <input type="checkbox"/> MAR <input type="checkbox"/> CMIR | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
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* If needed, see CPCH Pain Assessment Policy for the Pain Assessment Scale Decision Algorithm

Observed – *ex*) FLACC-r Reported – *ex*) Visual/Numbers/Analog

CMIR – Continuous Medication Infusion Record

LEGEND for INTERVENTIONS: *numbers to match: Comfort Management Care Plan Specific Symptom Management Care Plan

| Physical | | Psychological | |
|----------|-----|---------------|-----|
| 1 – | 4 – | 1 – | 4 – |
| 2 – | 5 – | 2 – | 5 – |
| 3 – | 6 – | 3 – | |

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