

## CAREGIVER DAILY LOG

(For Aid & Attendance, rating increases, and 1151 documentation)

Caregiver Name: \_\_\_\_\_

Veteran: \_\_\_\_\_

Date Range: \_\_\_\_\_

Date	Assistance Provided	Duration	Safety Concerns	Notes
	Bathing			
	Dressing			
	Meal Prep			
	Mobility Transfer			
	Medication Management			

You can duplicate the rows for a full month.

## FALL INCIDENT LOG

(Extremely common for spinal issues, neuropathy, dizziness, Parkinsonism, medication reactions)

### Fall Incident Report

Veteran: \_\_\_\_\_

Date of Fall: \_\_\_\_\_

Location: \_\_\_\_\_

### Describe the fall:

- What caused it?
- Could the veteran stand afterward?
- Did they hit their head?
- Did they require assistance to get up?

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### Injuries Noticed

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### Was VA contacted?

- Yes

- No

If yes, date/time of contact: \_\_\_\_\_

### Emergency care needed:

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## CAREGIVER BURDEN QUESTIONNAIRE

(Optional but powerful evidence)

Rate each item 0–4

0 = Not at all

4 = Almost always

Question	Rating
I feel stressed caring for the veteran	
I feel physically tired	
The veteran needs constant supervision	
I cannot leave them alone safely	
Their mobility limitations require my assistance	