

Paperwork Order Sheet

Count the number of forms in each pocket (P).

Write the count in column (C).

Subtract the count from the Target quantity (T).

This is the quantity you should Order , write it in column (O).

P	T - C = O	Form Contents	P	T - C = O	Form Contents
1	See Below	Shift Notes (also count notes in Box)	25	3	MAR - PRN Effectiveness
2	5	Paperwork Order	26	2	MAR - Tasks
3	5	Supply Orders	27	2	MAR - Treatment
4	5	Facility Visit Reports (FVR)	28	3	MAR - Medication Hold Record
5	5	Timesheets	29	1	MAR - Coumadin
6	5	Doctors Orders - Rx Transcribe	30	1	MSR - Acknowledgements
7	5	Doctors Orders	31	2	BM Tracking Log
8	3	Therapist Notes	32	2	Trach, G-tube, Foley Change Log
9	5	Narrative Notes	33	2	Pain Monitoring Log
10	5	Client Acquaintance Worksheet	34	2	Tracking Log Sheets
11	2	Care Calendar Blank Page	35	1	House Rules Start up page
12	3	Nursing Competency Review	36	1	Contact Numbers Start Page
13	3	Supervisory Visit Form	37	1	Labels - Blank
14	1	Concern Report	38		
15	2	Incident Reports-Client	39		
16	2	Incident Reports-Employee	40		
17	5	Battery Challenge	41		
18	5	Wound Sheets	42		
19	10	Med Count Sheets	43		
20	2	Seizure Record	44		
21	2	MAR - Standing	45		
22	2	MAR - Standing - OTC	46		
23	2	MAR - PRN	47		
24	2	MAR - PRN - OTC	48		

Box		Shift Notes	Box	5	Large PHI Envelope
Box	2	Correction Post-It Pads	Box	5	Small PHI Envelope

Other Forms or Office Supplies Needed:
