**Beschreibung der Pflegesituation** für \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Blatt Nr.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Erstellt von:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Kurs:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ erstellt am:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Themenfeld 1 – kognitive und kommunikative Fähigkeiten |

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| Beschreibung der Pflegeprobleme und Ressourcen | Festlegung der Pflegeziele | Beschreibung der Pflegemaßnahmen | Zeitpunkt |
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| Themenfeld 2 – Mobilität und Beweglichkeit |

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| Beschreibung der Pflegeprobleme und Ressourcen | Festlegung der Pflegeziele | Beschreibung der Pflegemaßnahmen | Zeitpunkt |
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| Themenfeld 3 – krankheitsbedingte Anforderungen und Belastungen |

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| Beschreibung der Pflegeprobleme und Ressourcen | Festlegung der Pflegeziele | Beschreibung der Pflegemaßnahmen | Zeitpunkt |
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| Themenfeld 4 - Selbstversorgung |

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| Themenfeld 5 – Leben in sozialen Beziehungen |

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| Themenfeld 6 – Wohnen/ Häuslichkeit bzw. Haushaltsführung |

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| Beschreibung der Pflegeprobleme und Ressourcen | Festlegung der Pflegeziele | Beschreibung der Pflegemaßnahmen | Zeitpunkt |
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Unterschrift/ HDZ:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_