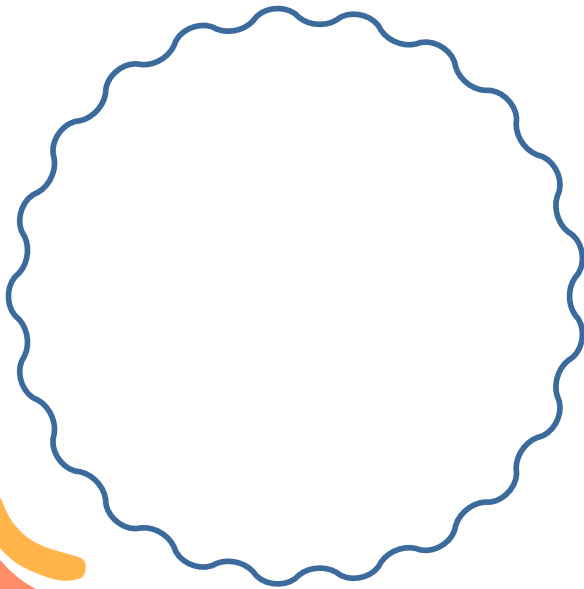


All About Me



My name:

My birthday:



Weight: _____

Height: _____

HR: _____

BP: _____

Resp: _____

O2: _____



Diagnosis:

What works for me:

Medications:



My favorite color:

My favorite food:

What doesn't work for me:

My goals:

My strengths:

