Residents' Hearing Aid Chart™

Name:		Room #	Hearing Aid Model:	
			Caregiver's Initials	
	Date:			
	Time placed in storage: Time placed in ears:			
	Daily or Weekly cleaning		<u> </u>	
	Date:			
	Time placed in storage:			
	Time placed in ears:			
	Daily or Weekly cleaning	9		
	Date:			
	Time placed in storage:			
	Time placed in ears:			
	Daily or Weekly cleaning	9		
	Date:			
	Time placed in storage:			
	Time placed in ears: Daily or Weekly cleaning			
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	Date:			
	Time placed in storage: Time placed in ears:			
	Daily or Weekly cleaning			
		9		
	Date: Time placed in storage:			
	Time placed in storage.			
	Daily or Weekly cleaning			
	Date:			
	Time placed in storage:			
	Time placed in ears:			
	Daily or Weekly cleaning	9		
	Date:			
	Time placed in storage:		<u></u>	
	Time placed in ears:			
	Daily or Weekly cleaning	9		
	Date:			
	Time placed in storage:			
	Time placed in ears:		<u> </u>	
	Daily or Weekly cleaning	d		
	Date:			
	Time placed in storage:			
	Time placed in ears: Daily or Weekly cleaning			
	,	9		
	Date:			
	Time placed in storage: Time placed in ears:			
	Daily or Weekly cleaning			