Hospice & Palliative CareCenter
CHF SELF CARE CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**	☐ **Difficulty breathing** ☐ **Water Pill** ☐ **Swelling** ☐ **Weight** __________ **Good Bad**
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