

My Preferences

Eating and Drinking

 I Need Help With This

I Prefer To Eat In: **My Own Room.**

My Morning Drink: **I Do Not Take Hot Drinks.**

My Food Texture: **Soft**

My Drink Texture: **Thickened**

Food That I Do Like:

Mashed Potatoes, Carrots, Peas.

Food That I Do Not Like:

Cabbage.

Hygiene and Appearance

 I Need Help With This

Hair Trim. Hair Perm.

Hair Colour. Hair Drying.

Hairdresser To Use: **In House Hairdresser**

Male Shaving. Female Hair Removal:

Finger Nails: Toe Nails:

Hygiene and Appearance Comments:

Tap to change text

Getting Around

 I Need Help With This

Appropriate Chair: **WheelChair**

Walking Aid: **Stick**

Getting Around Comments:

I have a motorised wheelchair and a walking stick.

Mouthcare

 I Need Help With This

I Have: **My Own Teeth**

I Like To Floss: **I Do Not Floss**

See Dentist: **Every 9 Months**

Products I Use:

Colgate toothpaste and Mint Mouthwash

Toileting

 I Need Help With This

How Often: **At My Request**

Pad Required: **No Pad**

Bowel Pattern: **Once Daily**

What I Can Do:

I can toilet myself

Eyesight and Hearing

 I Need Help With This

I Am: **Long Sighted**

I Wear: **Glasses**

My Hearing Aid: **In My Left Ear**

Bathing

 I Need Help With This

I Prefer: **Shower**

How Often: **Every Other Day**

Products I Use:

Any

What I Can Do:

Tap to change text

Clothing

 I Need Help With This

I Prefer To Wear:

Skirts Dresses Trousers
 Blouse T-Shirt Jumper Cardigan
 Shirt Tie Bra Pants
 Tights Stockings Socks Vest
 Under skirt Shoes Slippers Other
 Necklace Earrings Watch Rings

Comments: **Trainers**