

مستشفى مارينا الاهلي

Patient's Label

Name : \_\_\_\_\_

Sex : \_\_\_\_\_ Age: \_\_\_\_\_

File No.: \_\_\_\_\_

Attending Physician: \_\_\_\_\_

Interdisciplinary Health Education Record Form

Part 1 ( To Be Filled By The Initial Assessor )

Diagnosis : \_\_\_\_\_ Language of Education :  Arabic  English  Other: \_\_\_\_\_

Part 2 ( Please use Codes Abbreviation in Part 3 )

Date	Learning Needs	Learning Barriers	Instructor	Learner (s)	Learning Method (s)	Evaluation	Remarks	Staff No. & Name

### Part 3 ( Codes Abbreviation )

<b>Learning Need (s)</b>	<u>Meaning of Diagnosis MOD</u> <u>Causative Factors CAU</u> <u>Preventive Measures PM</u> <u>Reasons for Procedure/Surgery P/S</u> <u>Type of Anesthesia ANES</u> <u>Complications Of Disease COD</u> <u>Complications of Procedure COP</u>	<u>First Aid in case of complication FA</u> <u>Potential Food / Drug Interaction F/D</u> <u>Safe &amp; effective use of medications MED</u> <u>Prescribed Treatment RX</u> <u>Safe &amp; effective use of Equipment EQ</u> <u>Skills in doing procedure SK</u>	<u>Rehabilitation Technique Rehab</u> <u>Community Resources CR</u> <u>Personal Hygiene PH</u> <u>Healthy Lifestyle HLS</u> <u>Modified Diet DIET</u> <u>FALLS FL</u>	<u>Responsibilities of patients in their care RES</u> <u>Discharge instructions of continuing care D/C</u> <u>Financial Implications FI</u> <u>Others O ( Specify )</u>			
<b>Learning Barriers</b>	<u>Impaired Vision V</u> <u>Impaired Hearing H</u> <u>Emotional Barriers E</u>	<u>Illiteracy I</u> <u>Language Barrier L</u> <u>Impaired Speech S</u>	<u>Impaires Thought Process T</u> <u>Cultural/Religious Pactices RP</u> <u>Lack of Motivation M</u>	<u>Others O (Specify)</u>			
<b>Instructor</b>	<u>Physician DR</u> <u>Nurse N</u> <u>Health Educator HE</u>	<u>Pharmacist PHR</u> <u>Physiotherapist / Therapist P/TH</u> <u>Clinical Support Services CSS</u>	<u>Dietician DTN</u> <u>Social Worker SW</u>	<u>Public Relation Officer PRO</u> <u>Administrative Officer AQ</u>			
<b>Learner (s)</b>	<u>Family E</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><u>Parent</u> P</td> <td style="text-align: center;"><u>Spouse</u> SP</td> <td style="text-align: center;"><u>Sibling</u> SL</td> </tr> </table>	<u>Parent</u> P	<u>Spouse</u> SP	<u>Sibling</u> SL	<u>Patient Pt</u>	<u>Others O (Specify)</u>	
<u>Parent</u> P	<u>Spouse</u> SP	<u>Sibling</u> SL					
<b>Learning Method (s)</b>	<u>Lecture LE</u> <u>Demonstration by Instructor DI</u> <u>Demonstration by Learner DL</u>	<u>Group Discussion GD</u> <u>Verbal Instructions VI</u>	<u>Written Instructions W</u> <u>Audio Visual AV</u>	<u>Models / Samples M/S</u>			
<b>Evaluation</b>	<u>Asked Questions Q</u> <u>Attentive A</u>	<u>Demonstrated Ability with Assistance DAA</u> <u>Demonstrated Ability Independently DAI</u> <u>Refused Teaching REF</u>	<u>Needs Reinforcement R</u> <u>Disinterested D</u>	<u>Unable to Learn UL</u> <u>Verbalized Recall VR</u>			