

My name is \_\_\_\_\_

I like to be called \_\_\_\_\_



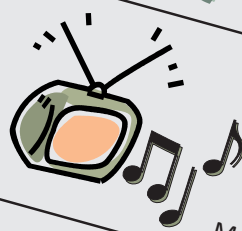
The important people in my life.



Dates that are important to me.



My previous or current occupation(s).



The activities that I am interested in.



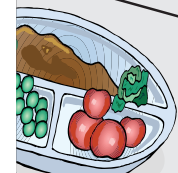
My favourite TV/radio programme(s) and music I like.



My pets and favourite animals, and animals I don't like.

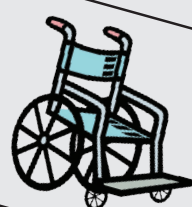


My spiritual beliefs and practices.

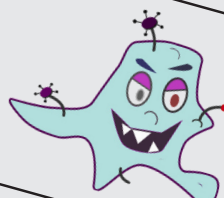


How I take my tea or coffee and drinks I like or dislike.

My favourite meal(s) and food I dislike or can't eat.



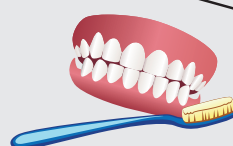
What aids I need for my mobility.



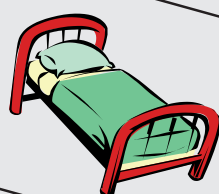
My allergies, phobias and fears.



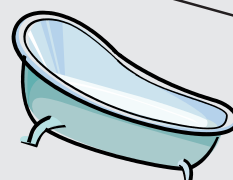
How I demonstrate that I am in pain.



What bedding / pillows I like and my preferred routine.



My likes / dislikes and usual bathing routine.



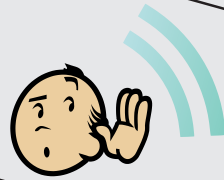
The level of assistance I need for



What you need to know



What my hearing is like



Key C

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