

Name: _____

Date: _____

PCA

B R E C I P I E N T B G O J S D S
R O P D K A N N V I Q Y G S B D L
D P D H R K S P N U D N T O F N G
V E Q Y J N X Z Y Q I H N H S Z N
S G C N M D N F O R D Y W I N S I
U N V U S E D A R P P Y Z W G X T
P I L M B K C E V R J P Z W I Z E
E M J I E I F H O C Z A X Y S N L
R O I E M S T M A X A X I D L A I
V O C A N C I U M N K Z Z J A C O
I R P A Y N N C S O I R D Z T C T
S G R F E L V O I C D C J Y I L Z
I T M N H D H V X S H D S W V B H
O B C O J P K I N P Q O W C M C Z
N E I A C M G B K N A C U Q U V Q
Z H E R A C L A N O S R E P U D P
M H R Y K J F I R E S P I T E Q N

BONY PROMINENCE

BODY MECHANICS

PERSONAL CARE

TRANSFERRING

VITAL SIGNS

SUPERVISION

RECIPIENT

DECUBITUS

TOILETING

GROOMING

RESPITE