

Date																	
Time																	
Respiratory Rate (breaths / min)	≥ 36															≥ 36	
	30–35															30–35	
	25–29															25–29	
	20–24															20–24	
	15–19															15–19	
	10–14															10–14	
	5–9															5–9	
≤ 4															≤ 4		
O₂ Saturation (%)	≥ 95															≥ 95	
	90–94															90–94	
	85–89															85–89	
	≤ 84															≤ 84	
O₂ Flow Rate (L / min)	> 5															> 5	
	1–5															1–5	
	< 1															< 1	
Blood Pressure (mmHg) Score systolic BP If systolic BP ≥ 200, write value in box	Write ≥ 200															Write ≥ 200	
	190s															190s	
	180s															180s	
	170s															170s	
	160s															160s	
	150s															150s	
	140s															140s	
	130s															130s	
	120s															120s	
	110s															110s	
	100s															100s	
	90s															90s	
	80s															80s	
	70s															70s	
	60s															60s	
	50s															50s	
	40s															40s	
	Heart Rate (beats / min) If heart rate ≥ 140, write value in box	Write ≥ 140															Write ≥ 140
		130s															130s
120s																120s	
110s																110s	
100s																100s	
90s																90s	
80s																80s	
70s																70s	
60s																60s	
50s																50s	
40s																40s	
30s																30s	
Temperature (C)	≥ 39.1															≥ 39.1	
	38.1–39.0															38.1–39.0	
	37.1–38.0															37.1–38.0	
	36.1–37.0															36.1–37.0	
	35.1–36.0															35.1–36.0	
	≤ 35.0															≤ 35.0	
Consciousness If necessary, wake patient before scoring	Alert															Alert	
	Voice															Voice	
	Pain															Pain	
	Unresp.															Unresp.	
Urine Output (mL / hour)	≥ 30															≥ 30	
	≤ 29															≤ 29	
Pain Score None (0) – Worst (10)	Write															Write	
Intervention	E.g. 'A'															E.g. 'A'	

(potential) COVID-19 diary, www.covid-at-home.info

Patient Name : ☐ COVID-19
DIAGNOSED

Date of Birth : Male / Female

To the left you can note any measurements. Just ignore fields for which you have no measurements and try to make sure you have at least temperature, heart rate, respiratory rate and the level of consciousness.

The colors in the chart, in a hospital setting, indicate growing levels of concern for the patient, with purple meaning an emergency, and even orange meaning the head nurse should have a look. Since you are probably not a nurse and not a doctor, hopefully the values are all in the white ranges, giving you some confidence that the patient is doing well (enough) to get through this. These values do not represent everything. **If something outside of these measurements worries you, talk to a doctor.**

Notes: (maybe today's weight, any food and how much he/she drank)