**Stop and Watch**

**Early Warning Tool**

If you have identified a change while caring for or observing a resident/patient, please circle the change and notify a nurse. Either give the nurse a copy of this tool or review it with her/him as soon as you can.

Seems different than usual
Talks or communicates less
Overall needs more help
Pain – new or worsening; Participated less in activities

Ate less
No bowel movement in 3 days; or diarrhea
Drank less

Weight change; swollen legs or feet
Agitated or nervous more than usual
Tired, weak, confused, or drowsy
Change in skin color or condition
Help with walking, transferring, toileting more than usual

☐ Check here if no change noted while monitoring high risk patient

Patient / Resident

Your Name

Reported to Date and Time (am/pm)

Nurse Response Date and Time (am/pm)

Nurse’s Name