

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____
RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____
RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____
GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____
HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____
RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____
RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____
GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____
HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____
RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____
RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____
GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____
HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____
RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____
RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____
GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____
HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____	HR: _____
RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____	RRR: _____
RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____	RE: _____
GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____	GC: _____

HR = Heart Rate (beats per minute)
 RRR = Resting Respiratory Rate (breaths per minute)
 RE = Respiratory Effort (on a scale 0-5; 0 = no effort, 5 = severe distress)
 GC = Gum Color