

MY T-O-G BAG

MY Checklist:

TOILETRIES & PERSONAL ITEMS:

- Deodorant
 - Hand sanitizer
 - 1 Change of clothing
 - Incontinence supplies
 - Tooth paste
 - Body towelets
 - Suntan Lotion
 - Nail file & Clippers
 - Tooth brush
 - Spare glasses
 - Soap
 - 1 towel
1. _____ 2. _____
3. _____
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ELECTRONICS:

- Extra Batteries (i.e.: hearing aids)
 - Head Phones
 - Wall plugs
 - Flashlight
 - Cell Phone Chargers & Batteries
1. _____ 2. _____
3. _____
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COMFORT ITEMS

- Blanket
 - Playing Cards
 - Magazine
 - Activity Cards
 - Sensory Items
1. _____ 2. _____
3. _____
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MISCELLANEOUS:

- Pad of Paper and Pens
 - Spare Keys
 - Cash/change
 - Small First Aid Kit
 - Snacks
 - Medications & medication supplies
 - Umbrella
 - Bottled Water
1. _____ 2. _____
3. _____
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DOCUMENTS:

- Copy of Current Medications, Allergies, & diagnosis
- Medicare & medical insurance cards
- Emergency phone list
- DNR/MOST form, Advance Directives
- Copies of all legal documents