

# Knee OA Daily Activity Context Map

Use this worksheet to connect Knee OA observations with daily routines, support needs, and handover questions.

| Field             | Use / Options                                                                                 |
|-------------------|-----------------------------------------------------------------------------------------------|
| Care setting      | Long-term care / Nursing center / Rehab or pain-recovery center / Home-community care / Other |
| Record point      | This shift / This activity / This week / Before review                                        |
| Anonymous case ID | No name, no medical record number                                                             |
| Completed by      | Nurse / Care assistant / Rehab-support staff / Coordinator                                    |

| Daily routine context        | [ ] | What changed?          | [ ] | Support used                 | [ ] |
|------------------------------|-----|------------------------|-----|------------------------------|-----|
| Chair rise                   | [ ] | More support needed    | [ ] | Verbal prompt                | [ ] |
| Indoor walking               | [ ] | Movement delayed       | [ ] | Staff assistance             | [ ] |
| Stairs                       | [ ] | More cautious gait     | [ ] | Walking aid                  | [ ] |
| Morning movement             | [ ] | Participation reduced  | [ ] | Seat or environment adjusted | [ ] |
| Personal care                | [ ] | Rest pause needed      | [ ] | Rest pause                   | [ ] |
| Outdoor or corridor mobility | [ ] | Walking aid used       | [ ] | Handover note completed      | [ ] |
| Other repeated task          | [ ] | Unclear - needs review | [ ] |                              |     |

| Final handover output                                            | Use in 3 minutes                                                                                                     | Do not record                                                                       |
|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| One daily activity context to hand over or review<br><div></div> | 1. Choose the care setting.<br>2. Tick the main context.<br>3. Tick one gap or change.<br>4. Choose one next action. | No patient name.<br>No medical record number.<br>No diagnosis.<br>No outcome claim. |

Boundary: this worksheet supports workflow documentation and handover preparation. It does not diagnose, prescribe treatment, compare clinical outcomes, or replace professional assessment.  
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