

Code Calm Nursing Journal

Renew Yourself for Every Shift

Name: _____ Date / Shift _____

Mood & Energy:



Notes on how I feel: _____

Top 3 Priorities

1. _____
2. _____
3. _____

Patient Wins / Positive Moments

- _____
- _____

Challenges Faced & How I Handled Them

- _____

Faith / Calm Moment

How I stayed centered or prayed: _____

Lesson / Improvement for Next Shift

“Be strong and courageous. — Joshua 1:9

