

Name:

Attending or resident signature:

Day / Evening / Night (circle one)

Medicine / Trauma / Pediatrics (circle one)

Patient Log

Patient sticker	Chief complaint or final diagnosis	Procedures performed	Present for <u>F</u> ull workup/ <u>T</u> urned over at end of shift/ <u>P</u> icked up in progress/ <u>O</u> bserved (circle one)
			F T P O
			F T P O
			F T P O
			F T P O

Name:

			F T P O
			F T P O
			F T P O
			F T P O
			F T P O