

Position Key: 1-Faculty 2-Resident 3-Student
4-Nurse 5-Other HCW 6-unknown

Position Key: 1-Faculty 2-Resident 3-Student
4-Nurse 5-Other HCW 6-unknown

Date:				
Location:				
#	Position	Indication	Action	Rounds
1		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
2		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
3		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
4		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
5		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
6		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
7		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
8		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
9		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
10		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
11		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
12		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
13		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
14		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
15		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
16		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
17		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
18		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
19		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
20		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
21		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
22		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
23		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
24		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
25		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N

Date:				
Location:				
#	Position	Indication	Action	Rounds
26		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
27		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
28		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
29		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
30		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
31		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
32		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
33		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
34		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
35		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
36		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
37		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
38		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
39		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
40		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
41		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
42		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
43		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
44		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
45		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
46		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
47		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
48		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
49		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N
50		<input type="checkbox"/> Before <input type="checkbox"/> After	<input type="checkbox"/> HW <input type="checkbox"/> HR <input type="checkbox"/> None	<input type="checkbox"/> Y <input type="checkbox"/> N