NETEC

NETEC In Room Log Sheet

Patient Sticker	Date: _____	Location: _____	☐ VHF _____ ☐ Respiratory Pathogen _____ ☐ Other _____

Directions: Staff members entering the isolation room will sign in and out. All possible breaches should also be documented.

Employee Name	Department	Time In	Time Out	Signature

☐ **PUI: Date Cleared**_____ ☐ Transfer Date: _____ **(for office use only)**

***Please save this form for the Infection Control Team**

NETEC August 30, 2019

EMORY MEDICINE | University of Nebraska Medical Center Nebraska Medicine | NYC HEALTH+ HOSPITALS | Bellevue

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