Drain Log

CARLOS MARCIALES
PLASTIC SURGERY

Depending on the number of drains you have, you may or may not need to use every column below.

Date	Drain # ____		Drain # ____		Drain # ____		Drain # ____	
	AM	PM	AM	PM	AM	PM	AM	PM
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:
__ / __ / __	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:	____ml Time:

Please bring this log to your first office appointment following surgery.