## HOSPITAL JOURNAL

Patient's Name_____ Date_____Day of Week (circle): M Tu W Th F S S *Page ___ of ___ pages*

Nurse on each shift: _____ _____ _____

| "What happened" (Except for medications—use medication journal for medications) | 7 am to 3 pm | 3 to 11 pm | 11pm-7am |
|---|---|---|---|
| *Example: Dr. Smith visited and said surgical wound was looking good.* | | *4:20/co* | |
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Write what happened on left; then put the time under the appropriate time column. For example, if an x-ray was done at 4:30 p.m., then write "chest x-ray" on left, and put 4:30 in 3-11 p.m. column. Put your initials (the person doing the journaling) by each time notation. 2/9co