

## Western Health COVID-19 Log Sheet

The name and contact number of each staff member who enters this room/ space is being collected for the purpose of contact tracing in the event of a confirmed COVID-19 case.

Footscray Hospital     Williamstown Hospital

Ward Department: \_\_\_\_\_

Sunshine Hospital     Sunbury Day Hospital

Room: \_\_\_\_\_

	Date	First Name	Surname	Mobile number	Time In	Time Out
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