## DRAIN SCORE CARD

DRAIN CARE INSTRUTION ON BACK OF PAGE: PATIENT NAME
PLEASE BRING DRAIN SCORE CARD TO OFFICE FOR REVIEW UNTIL DRAIN ARE
REMOVED

DATE	DRAIN #1	DRAIN #2	DRAIN #3	DRAIN#4
	8:AMcc's	8:AM cc's	8:AM cc's	8:AM cc's
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<sup>\* 11:</sup>PM or Bedtime