

Drain Output Record

<i>DATE</i>	<i>TIME</i>	<i>DRAIN #1</i>	<i>DRAIN #2</i>	<i>DRAIN #3</i>	<i>DRAIN #4</i>
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				
	8 AM				
	8 PM				

1. Be sure to squeeze the drain bulb from the sides before capping and record in cc's
2. Apply a small amount of Bacitracin ointment and a light gauze to the area where the drain comes out of the skin
3. **MOST IMPORTANT** – Do not forget to bring this Drain Record to your post op office visit and call if you have questions: **(210) 499-5900**