

ESM Downtime Form

Appointment Bookings

Downtime Date: Downtime Start Time (hh:mm): Downtime End Time (hh:mm):.....

Patient Name/ URN/Date of Birth <i>(write or attach label)</i>	Clinic/ Resource	Appt Type	Urgency Category	Requested Date /Timeframe	Scheduling Comments
<i>John Smith #1234567 01/01/89</i>	<i>ENT</i>	<i>New</i>	<i>2</i>	<i>3/52</i>	<i>3/52 – admitted to PAH emergency</i>

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