Monthly **Diaper Ointment** Log

Community Action of Southeast Iowa

Diaper Ointment Log

Month/Year_____**Teacher**_____

Child's Name	Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Time																															

*Only non-prescription diaper ointment logged on this form
Prescription medication should be logged on Medication Log form