**Employee Medical Log**

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| **Company Name:** |  | **Company Address:** |  |

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| **Employee Details** | | | | | | | |
| Name | |  | | | Address | | |
| Mobile Number | |  | | |
| Home Number | |  | | | Email Address |  | |
| GP Name | |  | | | GP Phone Number |  | |
| GP Address | |  | | | | | |
|  | | | | | |
| **Management** | | | | | | | |
| *(Please provide details of any current or ongoing medical conditions & treatment required (e.g. EpiPen in the case of severe allergies):* | | | | | | | |
| **Employee Name** | **Medical Condition** | | **Medication** | **Action to be taken** | | | **GP or Contact details** |
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In the event that an employee has an ongoing or known medical condition (e.g. diabetes, asthma, etc), this is a register of any instances of illness & action taken (e.g. use of an inhaler, calling an ambulance, etc).

This information is kept confidential on the employee’s human resources file.

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| **Medical Occurrences** | | | |
| *(Please provide details of any current or ongoing medical conditions & treatment required (e.g. EpiPen in the case of severe allergies):* | | | |
| **Employee Name** | **Medical Condition / Incident** | **Medication / Treatment Administered** | **Follow up details** |
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