



FORMATO PARA ENTREGA DE EPP
E.S.E HOSPITAL LOCAL DE PIEDECUESTA

AREA

FECHA

TURNOS: DIA / NOCHE

| NOMBRE | CARGO | HORA | FECHA | TAPABOCA | | GORRO | POLAINA | BATA | | GAFAS | CARETA | OVEROL | FIRMA |
|-----------------|------------|--------------------------------------------------|-------|----------|--------|-------|---------|------|-------|-------|--------|--------|-----------------------|
| | | | | NORMAL | No. 95 | | | ANTI | DESEC | | | | |
| Martha Bautista | Factura | 7:00AM | 06-07 | | X | | | | | | | | <i>[Signature]</i> |
| Silvia Lagos | Factura | 7:00AM | 06-07 | | X | | | | | | | | <i>Silvia Lagos B</i> |
| Tatiana Reyes | Factura | 7:00AM | 06-07 | | X | | | | | | | | <i>Tatiana Reyes</i> |
| Cifuentes | Orientador | 7:00AM 03-07 7:00AM 8-7-20 7:00AM 09-07-20 | | | | | | X | X | | | | <i>Cifuentes</i> |
| Gonzalez | Orientador | 7:00AM 06-07 7:00AM 07-07 | | | | | | X | X | | | | <i>Gonzalez</i> |

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