

## ONLINE CLINIC LOG SHEET

Master Gardener on Duty:	/ /2020
Master Gardener on Duty:	Date

CLIENT NAME	Client is: (Check one)
PHONE ( )	Male
ADDRESS (City or Area)	Female
EMAIL	

DETAILED PROBLEM DESCRIPTION:

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PICTURES PROVIDED (Check one)	Yes	No
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DIAGNOSIS and RECOMMENDATIONS: *(be specific, make additional notes on back if needed)*

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### REFERENCES (REQUIRED)

WEB <a href="https://www">https://www</a> .			
WSU PUBLICATION:			
BOOK:	PAGE NUMBER(S):		
OTHER:			
SENT SPECIMEN TO LAB: (check one)	Yes	No	DATE MAILED:

<b>DIAGNOSIS IS INCOMPLETE:</b> Additional Master Gardener attention required	(Date)
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COMPLETED BY (MG Name)	COMPLETE: (Date)
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*REMEMBER THAT YOU NEED TO FOLLOW THIS CASE TO COMPLETION. IF YOU NEED ASSISTANCE, CONTACT THE OFFICE CLINIC LEADS AT [officecliniclead@gmail.com](mailto:officecliniclead@gmail.com)*

***FOLLOW UP REQUIRED BY CLIENT***

	<i>Date:</i>	<i>Phone Message</i>	<i>Sent email</i>	<i>MG Name</i>
<i>Attempted Follow up #1:</i>				
<i>Attempted Follow up #2:</i>				
<i>Attempt #3 Last try</i>				
<i>Considered Complete if no response is sent after 1 week from Attempt #3</i>				<i>Sign and Date the FRONT PAGE</i>

	Contact info was not provided	Wrong phone or area code	Unable to leave a message	Wrong email	Client did not send info requested	Other: Make note below
CONSIDERED COMPLETE BECAUSE:  (Check as many as apply)						

***ADDITIONAL NOTES:***

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