

Department of Veterans Affairs

Memorandum

Date: _____

From: Chief, Neurology Service

Subj: Changes in Neurology Call Schedule

To: Telecommunications

The following changes have been made to the Neurology Call Schedule. The information below is accurate as of the date noted above. Please update your information accordingly. Thank you.

Day: _____

Date: _____

Resident Covering: _____ Pager #: _____

Day: _____

Date: _____

Resident Covering: _____ Pager #: _____

Day: _____

Date: _____

Resident Covering: _____ Pager #: _____

Form prepared by: _____ Pager #: _____

INSTRUCTIONS TO RESIDENTS:

Complete this form by filling any blanks, drop in fax folder (in front of Ted's desk). Fax 949-3648 and 358-4754.

Merrill Kanter Carolin, M.D.

Chief
Neurology Service