# Hospital Elder Life Program (HELP) iPad Sign Out

Please page Hospital Elder Life Program via Smart Web when a HELP iPad is checked out to a patient and later when it is returned. Page the **patient name** and the **HELP iPAD number**.

Thank You!

| **Patient Name** | **Room Number** | **iPad #** (e.g., helpipad1) | **Date signed out** | **Date Returned** |
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