

# Practice Audit

Date	Location	Time Started	Time Finished	Total time	Effectiveness (1=low/5=high)	Notes
					① ② ③ ④ ⑤	
					① ② ③ ④ ⑤	
					① ② ③ ④ ⑤	
					① ② ③ ④ ⑤	
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