FACILITY: _____

OKLAHOMA DEPARTMENT OF CORRECTIONS **INFIRMARY LOG**

MONTH/YEAR: _____

		INFIR	INFIRMARY LOG		IONTH/YEAR:		
	CODE: I = Infin	rmary Admission	O = Observation	C = Convalescent			
Name	DOC#	Diagnosis/Comments	Code	Discharged/ Released Date/Time	Discharged/ Released to (Unit/Facility)	Transferred to Hospital Name/Date/ Time	Returned from Hospital Date/Time
			CODE: I = Infirmary Admission	CODE: I = Infirmary Admission O = Observation	CODE: I = Infirmary Admission O = Observation C = Conv Name DOC# Diagnosis/Comments Code Discharged/ Released	CODE: I = Infirmary Admission O = Observation C = Convalescent Name DOC# Diagnosis/Comments Code Discharged/ Released Discharged/ Released to	CODE: I = Infirmary Admission O = Observation C = Convalescent Name DOC# Diagnosis/Comments Code Discharged/ Released Date/Time Discharged/ Released to (Unit/Facility) Transferred to Hospital Name/Date/