OKLAHOMA DEPARTMENT OF CORRECTIONS
THERAPEUTIC SECLUSION WATCH LOG

Inmate Name: _____ **ODOC Number:** _____ **Location:** _____

Frequency of Observation Ordered: _____

Staff Name: _____ **Title:** _____

Report Time: _____ **Departure Time:** _____

OBSERVATION CODES

1.	**AWAKE**	**4.**	**QUIET**	**7.**	**PACING**	**10.**	**ANGRY**
2.	**SLEEPING**	**5.**	**CRYING/SAD**	**8.**	**DELIBERATE SELF-HARM**	**11.**	**HAPPY**
3.	**TALKATIVE**	**6.**	**AGITATED**	**9.**	**THREATENED/ATTEMPTED ASSAULT OF OTHER**	**12.**	**ANXIOUS/NERVOUS**

DATE	TIME	CODE(s)	COMMENTS	SIGNATURE/TITLE