Consent By Roommate For Authorized Electronic Monitoring

I, _____________________________________________, OR
(name of resident)

I, _____________________________________________, on behalf of ____________________________,
(name of resident representative)                                           (name of resident)

Consent to allow authorized electronic monitoring by the other residing resident or their representative of
room number/location______________, in accordance with Oklahoma Statutes, Section 1-1953.6 of Title 63
Chapter 675.

Condition consent:

1) When the proposed electronic monitoring device is a video surveillance camera, condition
consent on the camera being pointed away from the consenting resident.

Yes, I want the camera pointed away from my side of the room_________ (Initial here)

No, I have no condition on placement__________ (Initial here)

2) Condition consent on the use of an audio electronic monitoring device being limited or prohibited.

Yes, I want limitations noted here__________________________________________ _______________

Yes, I want to prohibit audio surveillance in my room _________________(Initial here)

This form may be signed only by the resident or the guardian or legal representative of the resident, as
provided in 1-1902 of Title 63, Chapter 675 of the Oklahoma Statutes.

_____________________________________________________________  ______________________
Signature –If applicable - Any Resident also residing in the room/                                     Date
Guardian of Resident/Legal Representative of Resident (circle appropriate title)

____________________________________________________________________________________
Facility Name/Address

_____________________________________________________________  ______________________
Signature/Facility Representative                  Date

*Note – If the resident does not want to give consent, the resident requesting electronic monitoring
may request another room.

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