Date:	Reas	son for Sitter	:	s	uicide Level: (Circle) Level 3 1:1 sitter - must be in arms reach				
						Level 2 1	:1 sitter - Line of si	ight at all times	
Complete a new Patient Observation Record Each Shift					Document all that apply utilizing key below-				
Time	All Pts LOC-	<u>All Pts</u> Behavior	All Pts Activity	All Pts Diversion Activities Provided	All Pts Patient in Line of Site at all times	Suicide Prec. Safe Dietary Tray (Disposable items)	Suicide Prec. Visitor Name (Limit 2 a time)	Suicide Prec. Patient and Visitor belongings secured	
					+				
			+		+				
			+						
	O= OX3	W = Wanders	R = Turn Right	Y = Yes	Y= Yes	Y= Yes		Y = Yes	
	S= Sleep	RE= Attempt	L = Turn Left	N= No	O= Off Unit	N = No		N= No	
KEY	A= Awake/ Alert	to Remove Equipment	B = Back	F = Family /Visitor in					
	C= Confused	A= Aggressiv C= Calm	e C = Chair A = Ambulate	Room		remain	's on suicide pred in line of site at a luding the bathro	II times,	
Check All Risks Identified in Patient Room									
□ Door Handles			□ Door Frames		☐ Windows Fasteners		☐ Coat Hooks		
□ Pipes			☐ Shower Curtain Rods		☐ Shower/Tub Controls		☐ Sink Faucets		
☐ Grab Bars			☐ Gaps Between Toilets		☐ Tile Ceilings		☐ Door Hinges and Closures		
☐ Bed Frame ☐ Bed Cords			☐ Bed sheets ☐ Tubes/Lines / Telemetry		☐ Paper Towel Holders		☐ Soap Dispensers		
Leads/wires				relementy					
□ All Clothing / Belts / Shoe Laces / Jewelry/ Cell phone Removed and secured			□ Extra Furniture or Equipment (Chairs etc)		☐ Remove Extra Equipment (IV Poles, IV pumps, SCDs etc)		☐ Remove all Sharps From Room		
Risks Outside of Room if Patient is Ambulating									
						บนเสนเทย			
Shift: Sitter Signature:						Nurse Leader Signature:			
Sitter Signature:									
Medical City Plano, Texas 75075 (972) 596-6800 PATIENT OBSERVATION RECORD									
	Plano	•	(972)	596-6800					

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MCP-FFRD940-00999 (Rev. 05/19)