



**ROYAL GOVERNMENT OF BHUTAN
NAME OF HCC
DZONGKHAG**

Patient Monitoring tool/checklist for Physical/Chemical restrain

CID/Reg. No:						Date:							
Patients Name						Gender	M	F	Others				
Diagnosis						Age							
Name of Drug	Dosage	Route	Date & time	Advised	Administered by	Vitals						Urine Output	
						BP	Temp	SPO2	Resp	HR	RBS		GCS