

Record of Section 2/3/4 Lapse

| HOSPITAL NAME | | | |
|-------------------------------|------|------|--|
| WARD/UNIT NAME | | | |
| FULL NAME OF PATIEN | Т | | |
| DETAINED ON SECTION | N: | | |
| NAME OF R.C. | | | |
| DATE & TIME SECTION COMMENCED | DATE | TIME | |
| DATE & TIME SECTION LAPSED | DATE | TIME | |
| REASONS: | | | |
| SIGNATURE: | | DATE | |