

EDICAL RECORD

DOCTOR'S ORDERS

(Sign all orders)

DATE AND TIME

ART STOP RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

01/01/00
0730

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

Place Detainee in (b)(1) Sec

Reason For Restraint: Medical Necessity for Feeding

Medical Restraints order expires after 12 hours

Line of Sight Observation while in restraints.

Circulation checks every 15 mins for the first hour and then every hour.

Vital signs checks immediately after restraints and every 1 hour.

Offer restroom and fluids every 2 hours

Initiate Restraint Observation Checklist

(Orders to be signed by Licensed Independent (b)(3):10 USC LIP) within 1 hour of restraints)

NO FOOD - 01/01/00

(b)(3):10 USC §1206 (b)(6)

GITMO

(b)(3):10 USC §130b,(b)(6)

INITIATION OF RESTRAINTS - MEDICAL

Reason for Restraint: Medical Necessity for Feeding

Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There

is no evidence that medications or a medical process is causing this detainee's

refusal to eat. Detainee does not have any medical condition/disability that would place

him at greater risk during feeding using medical restraints.

Detainee will be observed continually while in medical restraints.

Detainee was told that he will remain in restraints until feed and post feed observation

time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary

feeding in medical restraints will no longer be required.

GITMO

(b)(3):10 USC §130b,(b)(6)

(continues on reverse side)

INPATIENT IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank; rate; hospital or medical facility)

REGISTER NO. WARD NO.

DOCTOR'S ORDERS
MEDICAL RECORD

693

MEDICAL RECORD DATE AND TIME	PROGRESS NOTES (Sign all orders)	
DL MAR 06 C 0852	<p>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</p> <p>Detainee placed in (b)(1) Reason for Restraints: <u>Medical Necessity</u></p> <p>Detainee was advised by the Medical Staff that hunger striking is detrimental to his health. His behavior is due to his refusal to eat and not due to mental status change or illness. Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered food at every meal, yet he refuses to eat. Because the detainee refuses to eat, restraints were initiated for medical necessity for feeding. Detainee will be observed continually and he will be reminded of how his behavior must change (he must eat voluntarily) to avoid the use of medical restraints for present and future feedings. Detainee was told that he will remain in medical restraints until feed and post feed observation (60-120 minutes).</p> <p style="text-align: right;">(b)(3):10 USC §130b,(b)(6)</p> <p style="text-align: center;">GITMO Nurse</p>	
	<p>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</p> <p>Indication: Malnutrition; hunger strike</p> <p>Under local anesthesia (viscous lidocaine, 2%), a <u>X10 F</u> enteral feeding tube was inserted in the <u>X R</u> <u>10</u> nostril using standard procedure. <u>10</u> was not used.</p> <p>Patient tolerated the procedure well. Placement in stomach was confirmed by <u>insufflation and test dose of water</u>. Successful procedure without complications.</p> <p style="text-align: right;">(b)(3):10 USC</p> <p style="text-align: center;">GITMO Dr. / Nurse</p>	
DL MAR 06 C 1215	<p>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</p> <p>Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding and was released from restraints and returned to his cell in good condition. Detainee was released from restraints at <u>1215</u>. Detainee <u>did not have physical injury from the restraint episode</u>. Detainee reported the following problems related to the restraint episode:</p> <p style="text-align: right;">(b)(3):10 USC</p> <p style="text-align: center;">GITMO Nurse</p>	

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank; rate; hospital or medical facility)

PROGRESS NOTES
Medical Record

693

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: Dec 11, 04 Limb Restrained: Time In: Time Out: Limb Restrained: Time In: Time Out:

DMAR Left arm 0852 1045 Left leg 0852 1045

Right arm 0852 1045 Right leg 0852 1045

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Yelling or screaming | 9. Standing | 15. Requesting release | 21. Destructive Behavior |
| 4. Cursing | 10. Walking or pacing | 16. Harmful to self | 22. Disrobing |
| 5. Crying | 11. Lying down | 17. Threatening staff | 23. Urinating/defecating on floor |
| 6. Laughing | 12. Sitting | 18. Assaultive | 24. Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|-----------------------------|-----------------------------|---------------------------------|------------------------------|
| A. Meal offered | E. Toilet offered (q 2 hr)* | I. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | J. ROM (q 2 hr)* | N. Bath/shower refused |
| C. Fluids offered (q 2 hr)* | G. Medication accepted | K. RN observation (q 2 hr)* | O. Pt/staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200			1800		
0015			0615			1215			1815		
0030			0630			1230			1830		
0045			0645			1245			1845		
0100			0700			1300			1900		
0115			0715			1315			1915		
0130			0730			1330			1930		
0145			0745			1345			1945		
0200			0800			1400			2000		
0215			0815			1415			2015		
0230			(b)(3):1		(b)(3)	1430			2030		
0245			0 USC		:10	1445			2045		
0300			0900	1, 12, 2, K, F	USC	1500			2100		
0315			0915	1, 12, 7, K	\$130	1515			2115		
0330			0930	1, 12, 7, K	b, (b)(1530			2130		
0345			0945	1, 12, 7, K	6)	1545			2145		
0400			1000	1, 12, 7, K		1600			2200		
0415			1015	1, 12, 7, K		1615			2215		
0430			1030	1, 12, 7, K		1630			2230		
0445			1045	Released		1645			2245		
0500			1100			1700			2300		
0515			1115			1715			2315		
0530			1130			1730			2330		
0545			1145			1745			2345		
Signature:		Initials:	Signature:		Initials:	(b)(3):10 USC §130b,(b)(6)					

693

MEDICAL RECORD		DOCTOR'S ORDERS (Sign all orders)	
DATE AND TIME	PR	DRUG ORDERS	DOCTOR'S SIGNATURE / NURSE'S SIGNATURE
START	STOP		
3/5/12	0930	RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING	
		Place Detainee in (b)(1) Sec 1.4 A	
		Reason for Restraint: Medical Necessity for Feeding	
		Medical Restraints order expires after 12 hours	
		Line of Sight Observation while in restraints	
		Circulation checks every 15 mins for the first hour and then every hour	
		Vital signs checks immediately after restraints and every 1 hour	
		Offer restroom and fluids every 2 hours	
		Initiate Restraint Observation Checklist	
		(Orders to be signed by Licensed Independent Practitioner (Physician or Pharmacist) within 1 hour of restraints)	
		GTMO D [Redacted]	
3/5/12	0930	INITIATION OF RESTRAINTS - MEDICAL	
		Reason for Restraint: Medical Necessity for Feeding	
		Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place him at greater risk during feeding using medical restraints.	
		Detainee will be observed continually while in medical restraints.	
		Detainee was told that he will remain in restraints until feed and post feed observation time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary feeding in medical restraints will no longer be required.	
		GTMO [Redacted]	

PATIENT'S IDENTIFICATION FOR PRINTED OR WRITTEN ENTRIES: GIVE NAME—last, first (middle, grade, rank, rate, hospital or medical facility) REGISTER NO. WARD NO.

DOCTOR'S ORDERS
MEDICAL RECORD

693 PM

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 16 MAR 02 Limb Restrained: Time In: Time Out: Limb Restrained: Time In: Time Out:

Left arm 0852 1245 Left leg 0852 1245

Right arm 0852 1245 Right leg 0852 1245

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Yelling or screaming | 9. Standing | 15. Requesting release | 21. Destructive Behavior |
| 4. Chasing | 10. Walking or pacing | 16. Harmful to self | 22. Disrobing |
| 5. Crying | 11. Lying down | 17. Threatening staff | 23. Urinating/defecating on floor |
| 6. Laughing | 12. Sitting | 18. Assaultive | 24. Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|-----------------------------|-----------------------------|---------------------------------|------------------------------|
| A. Meal offered | E. Toilet offered (q 2 hr)* | I. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | J. ROM (q 2 hr)* | N. Bath/shower refused |
| C. Fluids offered (q 2 hr)* | G. Medication accepted | K. RN observation (q 2 hr)* | O. P/staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200			1800		
0015			0615			1215			1815		
0030			0630			1230			1830		
0045			0645			1245			1845		
0100			0700			1300			1900		
0115			0715			1315			1915		
0130			0730			1330			1930		
0145			0745			1345			1945		
0200			0800			1400			2000		
0215			0815			1415			2015		
0220			0815	(b)(3):10 USC		1430			2030		
0245			0900	1, 12, I, K	(b)(3):10 USC	1445			2045		
0300			0915	1, 12, I, K	§130b, (b)(6)	1500			2100		
0315			0930	1, 12, I, K		1515			2115		
0330			0945	1, 12, I, K		1530			2130		
0345			1000	1, 12, I, K		1545			2145		
0400			1015	1, 12, I, K		1600			2200		
0415			1030	1, 12, I, K		1615			2215		
0430			1045	Released		1630			2230		
0445			1100			1645			2245		
0500			1115			1700			2300		
0515			1130			1715			2315		
0530			1145			1730			2330		
0545						1745			2345		
Signature:		Initials:	Signature:		Initials:	(b)(3):10 USC §130b,(b)(6)					

6093

MEDICAL RECORD DATE AND TIME	PROGRESS NOTES (Sign all orders)
3/5/04 08:00	<p>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</p> <p>Detainee placed in (b)(1) Sec Reason for Restraint: <u>Medical Necessity</u></p> <p>Detainee was advised by the Medical Staff that hunger striking is detrimental to his health. His behavior is due to his refusal to eat and not due to mental status change or illness. Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered food at every meal, yet he refuses to eat. Because the detainee refuses to eat, restraints were initiated for medical necessity for feeding. Detainee will be observed continually and he will be reminded of how his behavior must change (he must eat voluntarily) to avoid the use of medical restraints for present and future feedings. Detainee was told that he will remain in medical restraints until feed and post feed observation (60-120 minutes).</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p>
3/5/04 09:30	<p>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</p> <p>Indication: Malnutrition; hunger strike <i>10F used due to intolerance, 10F</i></p> <p>Under local anesthesia (viscous lidocaine, 2%), a <u>10 F</u> 12 F enteral feeding tube was inserted in the <u>R</u> / <u>L</u> nostril using standard procedure. A stylet was <u>not used</u>.</p> <p>Patient tolerated the procedure well. Placement in stomach was confirmed by insufflation and test dose of water. Successful procedure <u>without complications</u>.</p> <p style="text-align: right;">GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6)</p>
3/5/04 09:20	<p>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</p> <p>Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding and was released from restraints and returned to his cell in good condition. Detainee was released from restraints at <u>1720</u>. Detainee had <u>did not have physical injury</u> from the restraint episode. Detainee reported the following problems related to the restraint episode.</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p> <p style="text-align: center;"><small>(continue on next page)</small></p>

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank; rate, hospital or medical facility)

PROGRESS NOTES
Medical Record

STANDARD FORM 623 (REV. 7/91)
Prescribed by GSA/ICMR, FPMR (41CFR)

669 PM

RESTRAINT OBSERVATION SHEET
 U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 3/14/05

Limb Restrained:	Time In:	Time Out:	Limb Restrained:	Time In:	Time Out:
Left arm	<u>1530</u>	<u>1720</u>	Left leg	<u>1530</u>	<u>1720</u>
Right arm	<u>1530</u>	<u>1720</u>	Right leg	<u>1530</u>	<u>1720</u>

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Yelling or screaming | 9. Standing | 15. Requesting release | 21. Destructive Behavior |
| 4. Cursing | 10. Walking or pacing | 16. Harmful to self | 22. Disrobing |
| 5. Crying | 11. Lying down | 17. Threatening staff | 23. Urinating/defecating on floor |
| 6. Laughing | 12. Sitting | 18. Assaultive | 24. Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|-----------------------------|-----------------------------|---------------------------------|------------------------------|
| A. Meal offered | E. Toilet offered (q 2 hr)* | I. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | J. ROM (q 2 hr)* | N. Bath/shower refused |
| C. Fluids offered (q 2 hr)* | G. Medication accepted | K. RN observation (q 2 hr)* | O. Pt/staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0600			0600			1200			1800		
0615			0615			1215			1815		
0630			0630			1230			1830		
0645			0645			1245			1845		
0700			0700			1300			1900		
0715			0715			1315			1915		
0730			0730			1330			1930		
0745			0745			1345			1945		
0800			0800			1400			2000		
0815			0815			1415			2015		
0830			0830			1430			2030		
0845			0845			1445			2045		
0900			0900			1500			2100		
0915			0915			1515			2115		
0930			0930			1530	W/D/E/K	(b)(3)	2130		
0945			0945			1545	W/D/E/K	10	2145		
1000			1000			1600	W/D/E/K	USC	2200		
1015			1015			1615	W/D/E/K	§130	2215		
1030			1030			1630	W/D/E/K	b,(b)(2230		
1045			1045			1645	W/D/E/K	6)	2245		
1100			1100			1700	W/D/E/K		2300		
1115			1115			1715	W/D/E/K		2315		
1130			1130			1730			2330		
1145			1145			1745			2345		
Signature		Initials	Signature		Initials	Signature		Initials	Signature		Initials
									(b)(3):10 USC §130b,(b)(6)		

MEDICAL RECORD

DOCTOR'S ORDERS

(Sign all orders)

DATE AND TIME

START STOP

FX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

3/5/04
1200

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

Place Detainee in **(b)(1) Sec**

Reason For Restraint: Medical Necessity for Feeding

Medical Restraints order expires after 12 hours

Line of Sight Observation while in restraints.

Circulation checks every 15 mins for the first hour and then every hour.

Vital signs checks immediately after restraints and every 1 hour.

Offer restroom and fluids every 2 hours

Initiate Restraint Observation Checklist

(Orders to be signed by Licensed Independent **(b)(3):10 USC §130b,(b)(6)**

GITMO

hour of restraints)

3/5/04
1200

INITIATION OF RESTRAINTS - MEDICAL

Reason for Restraint: Medical Necessity for Feeding

Despite being advised that hunger striking is detrimental to his health, the detainee refuses to

eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There

is no evidence that medications or a medical process is causing this detainee's

refusal to eat. Detainee does not have any medical condition/disability that would place

him at greater risk during feeding using medical restraints.

Detainee will be observed continually while in medical restraints.

Detainee was told that he will remain in restraints until feed and post feed observation

time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary

feeding in medical restraints will no longer be required.

GITMO

(b)(3):10 USC §130b,(b)(6)

(continue on reverse side)

PRINT IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank, rate; hospital or medical facility)

REGISTER NO. WARD NO.

693 am

DOCTOR'S ORDERS
MEDICAL RECORD

MEDICAL RECORD DATE AND TIME	PROGRESS NOTES (Sign all orders)
3/5/14 @ 1230	<p>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</p> <p>Detainee placed in (b)(1) Sec Reason for Restraint: <u>Medical Necessity</u></p> <p>Detainee was advised by the Medical Staff that hunger striking is detrimental to his health. His behavior is due to his refusal to eat and not due to mental status change or illness. Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered food at every meal, yet he refuses to eat. Because the detainee refuses to eat, restraints were initiated for medical necessity for feeding. Detainee will be observed continually and he will be reminded of how his behavior must change (he must eat voluntarily) to avoid the use of medical restraints for present and future feedings. Detainee was told that he will remain in medical restraints until feed and post feed observation (60-120 minutes).</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p>
3/5/14 @ 1230	<p>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</p> <p>Indication: Malnutrition; hunger strike</p> <p>Under local anesthesia (viscous lidocaine, 2%), a <u>10 F</u> / <u>12 F</u> enteral feeding tube was inserted in the <u>R</u> / <u>L</u> nostril using standard procedure. A stylet was / <u>was not used</u>.</p> <p>Patient tolerated the procedure well. Placement in stomach was confirmed by insufflation and test dose of water. Successful procedure without complications.</p> <p style="text-align: right;">GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6)</p>
3/5/14 @ 1230	<p>DISCONTINUATION OF RESTRAINTS NOTE AFTER F</p> <p>Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding and was released from restraints and returned to his cell in good condition. Detainee was released from restraints at <u>1400</u>. Detainee had / <u>did not have physical injury</u> from the restraint episode. Detainee reported the following problems related to the restraint episode.</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6) (continue on reverse)</p>

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank; rate; hospital or medical facility)

693

PROGRESS NOTES
Medical Record

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 3/3/64

Limb Restrained:	Time In:	Time Out:	Limb Restrained:	Time In:	Time Out:
Left arm	<u>1230</u>	<u>1420</u>	Left leg	<u>1230</u>	<u>1420</u>
Right arm	<u>1230</u>	<u>1420</u>	Right leg	<u>1230</u>	<u>1420</u>

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Yelling or screaming | 9. Staring | 15. Requesting release | 21. Destructive Behavior |
| 4. Cursing | 10. Walking or pacing | 16. Harmful to self | 22. Disrobing |
| 5. Crying | 11. Lying down | 17. Threatening staff | 23. Urinating/defecating on floor |
| 6. Laughing | 12. Sitting | 18. Assaultive | 24. Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|-----------------------------|-----------------------------|---------------------------------|------------------------------|
| A. Meal offered | E. Toilet offered (q 2 hr)* | I. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | J. ROM (q 2 hr)* | N. Bath/shower refused |
| C. Fluids offered (q 2 hr)* | G. Medication accepted | K. RN observation (q 2 hr)* | O. Pw/staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200			1800		
0015			0615			1215			1815		
0030			0630			1230	112 JK	(b)(3):1	1830		
0045			0645			1245	112 JK	0 USC	1845		
0100			0700			1300	112 JK	§130b,(1900		
0115			0715			1315	112 JK	b)(6)	1915		
0130			0730			1330	112 JK		1930		
0145			0745			1345	112 JK		1945		
0200			0800			1400	112 JK		2000		
0215			0815			1415	112 JK		2015		
0230			0830			1430			2030		
0245			0845			1445			2045		
0300			0900			1500			2100		
0315			0915			1515			2115		
0330			0930			1530			2130		
0345			0945			1545			2145		
0400			1000			1600			2200		
0415			1015			1615			2215		
0430			1030			1630			2230		
0445			1045			1645			2245		
0500			1100			1700			2300		
0515			1115			1715			2315		
0530			1130			1730			2330		
0545			1145			1745			2345		
Signature:		Initials	Signature:		Initials	(b)(3):10 USC §130b,(b)(6)					

593