ABC Observation Form

General Mood: I) Pleasant II) Agitated III) Tired IV) Manic V) Anxious VI) Depressed VII) Other: _____ VIII) Other: _____

Triggers: A) Negative comment from other patient B) Denied activity C) Denied item D) Asked to do task E) Other:

Behaviors of Concern: 1) Posturing 2) Threatening 3) Agitation 4) Aggression to Property 5) Self Injury 6) Profanity 7) Negative self-statements 8) Other: ______7) Other: ______

Precursor Behavior: The behavior that preceded the behavior of concern (the behavior that required intervention). Use anything from the list above.

Date/ Time	Dura- tion of Episode	<u>General</u> <u>Mood</u> During shift or during previous shift (if behavior occurred at the beginning of shift)	before the	Precursor Behavior (What behavior preceded behavior of concern)	<u>Behavior(s)</u> of Concern	<u>Maintaining Consequences</u> What occurred immediately after the behavior? What did caregiver or peers do?	<u>Comments</u> What else do you think is important about this behavior episode?	<u>Initials</u>
Ex. 5/1/07 1pm	20 mins.	П	А	II, 1, 2, 3	5	Staff intervened. Required restraint and medical attention.	Has frequent altercation with this particular patient.	RG

Psychology Rosario 5/01/07