

# PATIENT RESTRAINT

## OVERVIEW:

The decision to use physical or chemical restraint in the out of hospital setting presents issues of civil rights and liberties. However, there are circumstances when the use of restraints is in the best interest of the patient, staff, or the public. The two primary methods of patient restraint utilized in the out of hospital setting include physical and chemical restraints.

## INDICATIONS:

- ❑ Patient restraint should be considered when a careful assessment establishes that the patient is a danger to self or others by virtue of a medical or psychiatric condition.

## CONTRAINDICATIONS:

- ❑ Patients refusing treatment unless under police hold
- ❑ Contraindications for Midazolam administration
  - See “Midazolam” Protocol

## PROCEDURE:

### ***PHYSICAL RESTRAINTS:***

- ❑ Use the minimum level of physical restraint required to accomplish patient care and ensure safe transportation.
- ❑ Avoid placing restraints in such ways that impede physical exam, patient care activities, or cause further harm.
- ❑ Soft restraints may be sufficient. However, if not, may consider placing patient supine on long backboard and securing all extremities to backboard with leather restraints, soft restraints or carefully placed flex restraints.
- ❑ If necessary, utilize cervical spine precautions to control violent head movements
- ❑ Place padding under the patient’s head and in voids to prevent patient from harming him/herself
- ❑ Secure backboard to stretcher
- ❑ Document circulatory status on all extremities every 15 minutes

### ***CHEMICAL RESTRAINT:***

- ❑ Sedative agents may be used to provide a safe method of restraining violently combative patients.
- ❑ Physically restrained patients who are violently fighting their restraints and combative head injury patients are good candidates for chemical restraints.
  - Administer **2.5mg to 5mg Midazolam** IN, IM, IV, or IO as needed. See “Midazolam” guideline **OR**
  - Administer **2.5 mg IV or 5 mg IM Droperidol**. See “Droperidol” guideline
- ❑ Assess vital signs within first five minutes and be prepared for side effects
- ❑ Monitor vital signs and airway frequently

## CONSIDERATIONS:

- ❑ Anytime a patient is restrained it must be documented on a PHCR