

PATIENT RESTRAINTS

I. PURPOSE

To outline appropriate use of patient restraints.

II. POLICY

- A. Safety of responding personnel, community, and the patient is of paramount concern.
- B. Restraints should only be utilized in situations where the patient is exhibiting behavior that presents a danger to themselves or others.
- C. Law enforcement considerations
 - 1. Law enforcement personnel are responsible for the capture and/or restraint of assaultive or potentially assaultive patients. Law enforcement personnel should assist in preparing these patients for safe ambulance transport.
 - 2. Law enforcement agencies retain primary responsibility for safe transport of patients under arrest or on a 5150 hold.
 - 3. Patients under arrest must always be accompanied by law enforcement personnel. Law enforcement personnel should be prepared to accompany a patient on a 5150 hold if assistance is needed for safe transport.
 - 4. Patients under arrest or on 5150 hold shall be searched thoroughly by law enforcement for weapons prior to being placed in the ambulance.

III. PROCEDURE

A. General approach

- 1. Behavioral emergencies may be a manifestation of a medical condition such as head injury, drug or alcohol intoxication, metabolic disorders, hypoxia, or post-ictal state. Field personnel should consider these conditions along with psychiatric disorders in the approach to behavioral emergencies.
- 2. Field personnel should keep scene safety in mind and maintain situational awareness for changing circumstances.
- 3. Field personnel should attempt to de-escalate verbally aggressive behavior with a calm and reassuring approach and manner.

B. Restraint types

- 1. Leather or cloth restraints may be utilized for patient restraint during transport.
- 2. Handcuffs may only be applied by law enforcement personnel and should be replaced with another method of restraint prior to transport.
 - a. If handcuffs must be used for restraint during transport law enforcement personnel must accompany the patient in the ambulance.
 - b. A patient in handcuffs may not be handcuffed to the gurney.
- 3. Chemical restraint may be necessary and shall be used only with a base order.

C. Patient Restraint Safety Measures

- 1. Physically restrained patients shall be placed in a lateral position or supine in Fowler's or Semi-Fowler's position (gurney angled 30-90 degrees).



2. Patients shall not be transported in a prone or "hog-tied" position.
3. The method of restraint must allow for adequate monitoring of pulse and respiration, and should not restrict the patient or rescuer's ability to protect the airway should vomiting occur.
4. Restrained extremities should be monitored for circulation, motor function, and sensory function every 15 minutes along with vital signs and mental status.
5. Patients who are chemically restrained will be placed, whenever possible, on continuous cardiopulmonary monitoring and pulse oximetry during transport.
6. Prehospital documentation should include behavior reason for restraint, other pertinent clinical information, and documentation of monitoring of restrained extremities.

D. Other considerations

1. If an unrestrained patient becomes aggressive or assaultive during transport, ambulance personnel shall make reasonable efforts to calm and reassure the patient and request law enforcement assistance.
2. If the crew believes their personal safety is at risk, they should not inhibit a patient's attempt to leave the ambulance. Every effort should be made to release the patient into a safe environment. Ambulance personnel are to remain on scene until law enforcement arrives to take control of the situation.