I. PURPOSE
This policy provides guidance on managing patients with assaultive behavior and direction on the authorized use of patient restraints.

II. APPROACH TO ASSAULTIVE PATIENTS
1. Assaultive behavior may be a manifestation of a medical condition such as head injury, drug or alcohol intoxication, metabolic disorders, hypoxia, or postictal state. Field personnel should consider these conditions along with psychiatric disorders in their differential diagnosis.
2. Prehospital personnel should obtain a detailed history from family members, bystanders, and law enforcement personnel, and make particular note of patient surroundings for clues to the cause of the behavior (e.g., drug paraphernalia, medication bottles, and alcoholic beverage containers).
3. Prehospital personnel should attempt to de-escalate aggressive behavior with a calm and reassuring approach and manner.

III. RESPONSIBILITY OF LAW ENFORCEMENT
1. Law enforcement personnel are responsible for the capture and restraint of assaultive or potentially assaultive patients. Prehospital personnel should obtain assistance from law enforcement to prepare patients for ambulance transport. Request law enforcement assistance if not already on scene.
2. Law enforcement agencies retain primary responsibility for safe transport of patients under arrest or on a psychiatric detention (Welfare and Institutions Code § 5150).
3. Patients under arrest or on a psychiatric detention shall be searched thoroughly by law enforcement for weapons and contraband prior to placement in the ambulance.
4. Patients under arrest must always be accompanied in the ambulance by law enforcement personnel.
5. Prehospital personnel and law enforcement officers should mutually agree on the need for law enforcement assistance during transport of patients on a psychiatric detention.

IV. USE OF RESTRAINTS
1. Restraints should only be utilized when necessary and in situations in which the patient is exhibiting behavior that presents an immediate danger to themselves or others. Providers must appropriately document the reasons for the use of restraints.
2. Leather or cloth restraints are the only authorized method of restraining patients.
3. Handcuffs may only be applied by law enforcement personnel. Handcuffs should be replaced with leather or cloth restraints prior to transport. Handcuffs may only be used for restraint during transport when law enforcement personnel accompany the patient in the ambulance and no other safe alternative exists. A patient in handcuffs shall not be handcuffed to the gurney or ambulance.
4. Before restraining any patient, prehospital personnel must ensure there are sufficient properly trained personnel available to physically restrain the patient safely.
5. Restrained patients shall be placed in a supine, semi-Fowler’s, or Fowler’s position. Patients shall never be transported in a prone or "hog-tied" position.

6. 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.

7. Restrained extremities should be assessed for circulation, motor function, and sensory function every fifteen (15) minutes and documented in the EHR.

8. Prehospital documentation must include a specifically articulable reason for the use of restraints such as an immediate threat to the patient, prehospital provider or the public.

9. Patients with medical conditions that appear to compromise their ability to consent for care, or where a life threatening emergency exists or potentially exists, may be restrained when indicated and transported without law enforcement authority.

V. TRANSPORT

1. If an unrestrained patient becomes assaultive during transport, prehospital personnel shall request law enforcement assistance and make reasonable efforts to calm and reassure the patient.

2. Prehospital personnel should not physically inhibit a patient’s attempt to leave the ambulance. However, every effort shall be made to release the patient into a safe environment.

3. If a patient does leave the ambulance, prehospital personnel are to remain on scene, or at a safe staging location, until law enforcement arrives.