

Southern Illinois Regional EMS System

A-4 USE OF PHYSICAL RESTRAINTS

ALS/ILS/BLS

Purpose:

- It may become necessary to use physical restraints on a patient who becomes violent secondary to acute mental incompetence and medical care is clearly indicated and/or the patient presents a danger to self or others, including health care personnel.
 - Physical restraint should be considered only if the existing threat to the patient and/or other people outweigh the risk of restraining.
 - Restraints may not be employed as punishment or for the convenience of EMS personnel or a substitute for treatment.

Restraints Methods:

- The technique used to contain a violent behavior should begin with a gentle, non-threatening, low-profile approach and progress to more direct interventions as needed.
- Always explain options of physical restraint to the patient before applying force. If the patient is still unwilling to cooperate, advise him/her that restraint is necessary to protect himself/herself and others from injury.
- Consideration of the patient's behavior should be the primary indication for the type/degree of restraints.
 - For example, combative/assaultive patient behavior may require a four (4) point leather restraint to prevent injury to self or others whereas the confused patient may require only being securely strapped to the cot.
- EMS personnel should consider the patient's muscle groups and potential range of motion before initiating restraint procedures. Plan to position the patient in a way that limits the effectiveness of his/her strength and range of motion.
- EMS personnel should be familiar with the restraining devices available and improvise as needed. Effective restraint methods are as follows:
 - Manufactured leather restraints with padded bracelets for wrists and ankles.
 - Manufactured cloth/nylon restraints with padded bracelets for wrists and ankles.
 - Webbed straps ordinarily used to secure patients to spine boards
- Handcuffs and other law enforcement restraint devices are not approved to be applied by EMS personnel.
 - If law enforcement restraint devices are on your patient, a police officer should accompany the patient during transport.
- Regardless of the types of restraint used, they should be strong enough to produce the desired effect without compromising circulatory or respiratory status.

Sequence of Restraint Actions/Guidelines:

- To safely restrain the patient, use a minimum of four people.
- Contact Medical Control as soon as possible for an order/guidance.
- If available, use police protective custody.
- Explain the procedure to the patient (and family) if possible. The team leader should be the person communicating with the patient.
- If attempts at verbally calming the patient have failed and the decision is made to use restraints, do not waste time bargaining with the patient.

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A-4 USE OF PHYSICAL RESTRAINTS (continued)

- Remember to remove any equipment from your person which can be used as a weapon against you (e.g. trauma shears, pens).
- Assess the patient and surroundings for potential weapons.
- Approach the patient, keeping the team leader near the head to continue communications and at least one person on each side of the patient.
- Move the patient to a backboard or the stretcher.
- Place the patient supine and place soft restraints on 4 limbs and fasten to the backboard or stretcher. Avoid restraining the patient prone.
- Transport as soon as possible.
- Perform circulation checks every 5 minutes (of all restrained limbs)

Refusal of Care:

- When a psychiatric patient refuses care, EMS personnel should consult with medical control. The decision to restrain, treat, or release the patient is a medical control decision. Restraint duty, if necessary, should be given to law enforcement personnel.

Documentation:

- Restraint procedures should be thoroughly documented on the PCR and should include:
 - Reasons for applying restraints
 - Time of application
 - Condition of the patient before and after application
 - Method of restraint
 - Any restraint equipment used
 - Especially if the equipment is not standard ambulance equipment
 - All other agencies involved in the restraint procedure