Patient Safety Restraints

When you encounter a situation where an individual poses a danger to self or others, use of safety restraints may be necessary. If you do need to restrain a patient, the method of restraint should use the least restrictive method necessary to ensure safe transportation. Any restraints used should be humanely and professionally administered. It’s important to preserve as much dignity to the patient as the situation allows.

If the need to restrain arises, remember the three steps to restraint.

**Step 1:** Verbal de-escalation and verbal restraint

**Step 2:** Restrain the patient face up using soft restraints

**Step 3:** Proper medical assessment and chemical restraint

**Restraint Protocol**

Follow restraint protocol to ensure patient safety. This protocol covers observation, treatment during the period of restraint, and ongoing assessment of the situation including means and needs of restraint. You need to monitor the medical conditions that contribute to their violent behavior, including hypoxia, alcohol or drug intoxication, hypoglycemia, stroke, and brain trauma. Also, remember that there may be situations where restraining the patient falls outside of your duty and responsibilities. True apprehension and management of dangerous patients is best left to law enforcement professionals.

**Document the Situation**

The use of restraints needs to be carefully documented. Include the reasons for restraint, who applied the restraints, what method of restraint was used, and periodic assessment of the patient and others. Document the frequency of assessment and care provided during transport. This should include vital signs, skin integrity where the restraint is placed as well as continued assessment of the emotional state and whether or not continued restraint is necessary.

**Develop Best Practices**

Use the following as best practices when you need to restrain patients.

- Prior to restraining a patient, seek help from additional personnel or law enforcement. Ideally, there would be five people present to safely control a patient and apply the restraints.
- Avoid placing restraints in a way that will impact access to patient evaluation or cause further harm.
- Always notify the receiving facility when you have a patient that has been restrained prior to arrival.
- Do not restrain patients in a face down position. Most deaths occur in the prone position.
- Any physical restraint used needs to allow for rapid removal. Handcuffs should be avoided. If they are used, the key must be with the EMS crew.
- Never transport a patient when:
  - Hobbled
  - Hog tied
  - Restrained face down with the hands and feet behind the back
  - Sandwiched between devices
- Be sure when you restrain a patient, never to constrict the neck or compromise the airway.

Patients who continue to struggle after being physically restrained may need chemical restraint to minimize the opportunity for cardiac arrest. Chemical restraint includes the use of anti-psychotic medications such as Haldol, benzodiazepines like Ativan or Versed, or both. Be sure to document what chemical was used, how much was given, and when it was given to the patient. Refer to your medical protocols regarding the safety and amount of repeat doses if needed.

Any time you use restraints, be sure you conform to applicable laws, rules, regulations, and accreditation standards. The goal of any situation is to keep yourself, your patient, and others on the scene safe. Even with proper restraint there will be tragedies, but maintaining safe practices will help keep tragedies to a minimum.

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