
Forsyth County EMS

Skill Procedure: Restraints

	MR / EMT	
	Expanded Scope EMT	
	EMT-I	
	EMT-P	

Clinical Indications:

- A. Patients with an actual or a potential threat to self or others.

II. Procedure:

- A. Evaluate the need for restraints. Restraints should be considered only as a last resort after verbal techniques have failed.
- B. The least amount of restraint necessary to accomplish the desired purpose should be used.
- C. The restraints should not be limiting to the patient's peripheral or central circulation or respiratory status.
- D. The restraints should be frequently monitored during transport. Neurovascular status of restrained parts should be assessed.
- E. Documentation on/with the patient care report (PCR) should include the reason for the use of restraints, the type of restraints used, and the time restraints were placed. Complete and attach the Restraint checklist.

Procedure for Application of Posey® Limb Holders (Additional Restraints)

1. Determine the need for the use of additional restraints per FCEMS SOGs, Article 18.
2. Institute notification procedure and request for manpower per protocol.
3. Assure safety per protocol.
4. Consider alternatives: Examples-
 - a. Utilizing family members to calm the patient,
 - b. Positioning the patient for greater comfort,
 - c. Giving the patient the necessary sensory aids,
 - d. Diversionary activities.
5. If possible explain to family or care giver the need for restraints
6. All patients should be continuously monitored for changes in/ but not limited to: Level of Consciousness, airway (compromise), respiration (pattern and rate) and circulation (central and distal) before and after application. If changes in the patient's condition occur the need for the restraints will be reevaluated and removed immediately if they are no longer considered essential or negatively impacting patient care (condition).

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7. Restraints should be inspected for broken stitches or parts; torn, cut or frayed straps or fabric; or hook and loop fastener that does not hold securely prior to use and after laundering. If any of these problems are noted then that restraint is to be discarded and replaced.
8. The “Posey” restraints are designed for patients with a wrist circumference of 7-9 inches therefore patients that have a wrist circumference of less than 7 inches and greater than 9 inches should not have “Posey” restraints applied. Restraints that are too tight may impede blood flow- monitor closely for skin discoloration, capillary refill, and other signs of diminished circulation. Restraints that are too loose will allow the patient to slip their arm out of the device. Restraints that do not fit correctly should not be used.
9. Before approaching the patient, prepare the limb holder as follows:
 - a. Feed the strap at the narrow end of the triangular cuff through the horizontal slot in the wide end of the cuff. Continue threading the strap through the loop, which is on the outside of the product.
 - b. Thread the 1” strap from the wide end of the cuff through the loop on the opposite direction.
10. Put the patient’s wrist or ankle through the pre-assembled limb holder.
11. Pull the strap on the narrow end of the triangle snug, and secure the “hook & loop” fastener, leaving enough space to insert one (1) finger between the wrist or ankle and the product to assure proper circulation.
 - a. DO NOT TIE A KNOT IN THE LOOP.
 - b. See “How to tie the Posey® Quick Release Tie” below.
12. Secure the limb holder to the stretcher with a quick-release tie or buckle out of the patient’s reach. When applying restraints to agitated patients who are likely to pull against the restraint, it is recommended to create a stress relief point on the connecting strap by wrapping it around a part of the stretcher bar between the patient and the quick-release tie. This will absorb the stress of pulling and protect the knot or buckle. (Assure that the strap is not secured to the lower part of the stretcher, which will remain down, or cause pulling or extension of the patient’s limb when the stretcher is raised, or that will create slack in the strap when the stretcher is lowered.)
13. Restraints should be fastened towards the patient’s front- not around to the patients back.
14. For greater restriction of movement, separate the straps and attach them to two (2) opposing points in a method called triangulation. For more freedom of movement, tie the straps together and allow as much range of motion as possible to achieve your goal per protocol.

15. Release the strap by pulling on the loose end of the quick-release tie or the “hook & loop” strap

How to Tie the Posey® Quick Release Tie

1. Care must be taken to assure that the limb holder is secured out of reach of the patient.
2. Create a stress relief point between the patient and the selected tie-off point if needed.
3. Wrap the attachment strap once around the selected part of the stretcher as noted in # 12 above, leaving at least an 8” tail. Fold the loose end in half to create a loop and cross it over the other end.

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4. Insert the folded strap where the straps cross over each other, as if tying a shoe. Pull on the loop to tighten.
5. Fold the loose end in half to create a second loop.
6. Insert the second loop into the first loop.
7. Pull on the loop to tighten.
8. To release this tie, pull on the loose end of the strap.

PRECAUTIONS

1. The use of “additional restraints” may worsen emotional, psychological, and physical problems.
2. A patient in a supine position who cannot sit up requires continuous monitoring of airway, breathing, and circulation. Have suction ready.
3. Limb holders that are applied too tightly or incorrectly can impair circulation. Extremity monitoring distal to the product for adequate circulation and skin coloration is mandatory.
4. Do not position the extremity under the patient’s body, or in any position outside its normal range of motion.
5. Do not use limb holders on extremities having fractures, dislocations, or open wounds.
6. Use caution in using limb holders on extremities in which IVs have been established.
7. Tie restraints in a manner so EMS and/or other personnel can quickly remove restraints. If the need arises the straps may be cut with scissors in an emergency.
8. Do not secure in such a way as to prevent changing of the patient’s position with tightening on the patient’s wrist- ex. Moving a patient from a Supine position to a semi-fowlers position.

UNDERLINING INDICATES MANDATORY DOCUMENTATION POINTS

III. Certification Requirements:

Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the local EMS System. Assessment should include direct observation at least once per certification cycle.

Approved by:
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Medical Director
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