

the child is in a restraint include leaving one finger breadth between skin and the device and tying knots that allow for quick release. The nurse can also increase safety by ensuring the restraint does not tighten as the child moves and decreasing wrinkles or bulges in the restraint. Placing jacket restraints over an article of clothing; placing limb restraints below waist level, below knee level, or distal to the IV; and tucking in dangling straps also increase safety and comfort. Do not place objects over a patient's face to protect staff from being spit upon or bitten. Masks and face shields should be readily available for staff to wear; some facilities also provide bite gloves and arm/hand wraps made of strong barrier materials (such as Kevlar) for staff to wear to prevent injury from bites and scratches.

## **Mummy Restraint or Swaddle**

When an infant or small child requires short-term restraint for examination or treatment that involves the head and neck (e.g., venipuncture, throat examination, gavage feeding), a papoose board with straps or a mummy wrap effectively controls the child's movements. A blanket or sheet is opened on the bed or crib with one corner folded to the center. The infant is placed on the blanket with the shoulders at the fold and feet toward the opposite corner. With the infant's right arm straight down against the body, the right side of the blanket is pulled firmly across the infant's right shoulder and chest and secured beneath the left side of the body. The left arm is placed straight against the infant's side, and the left side of the blanket is brought across the shoulder and chest and locked beneath the body on the right side. The lower corner is folded and brought over the body and tucked or fastened securely with safety pins. Safety pins can be used to fasten the blanket in place at any step in the process. To modify the mummy restraint for chest examination, bring the folded edge of the blanket over each arm and under the back and then fold the loose edge over and secure it at a point below the chest to allow visualization and access to the chest ([Fig. 20-4, A](#)).