

Restraints — Medical vs Behavioral — Demo Policy

Safety-focused, least-restrictive approach; for demonstration only.

Demo Policy • For training only • Version 0.1 • Generated Oct 06, 2025

Purpose & Principles

Promote patient and staff safety while preserving dignity and autonomy. Use the least restrictive intervention and discontinue promptly when criteria are no longer met.

Indications

Medical restraints: prevent interference with essential treatment (e.g., pulling tubes/lines) when alternatives fail. Behavioral restraints: manage violent or self-destructive behavior posing immediate risk.

Orders & Time Limits

Provider order required. Behavioral restraints: time-limited per regulation (e.g., adult max 4 hours). Renew per policy and reassess frequently. PRN orders are not permitted.

Monitoring & Reassessment

Behavioral: continuous observation; document q15 min (circulation, skin, behavior, toileting, nutrition, range of motion). Medical: assess q2h at minimum. Offer fluids, toileting, repositioning. Reevaluate need and loosen/rotate devices per manufacturer.

Application & Discontinuation

Apply per manufacturer instructions with padding and correct size. Maintain two-finger space. Tie to bed frame (not rail) with quick-release. Remove promptly when criteria no longer met; use alternatives (sitter, de-escalation, reorientation).

Documentation

Record indication, alternatives attempted, order details, consent/education, device type/site, monitoring parameters, circulation/skin checks, and time of discontinuation.

Patient Rights & Safety

Explain purpose and plan to patient/family when feasible. Protect privacy. Escalate concerns to charge nurse or provider immediately.