



Mercy Hospital of Pittsburgh

Department of Emergency Medicine

Restraint Orders

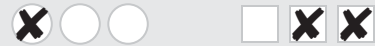
for use in DEM only

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Mandatory

Draw a line through, initial and date all changes.
Write "brand necessary" if generically equivalent medication is not acceptable.

Circles: one and only one. Squares: one, many, or none.



Reason for Restraint

Delirium/dementia, (medical/post-surgical) ends in 4 hours

Or

Violent, suicidal or homicidal (emergency behavioral management)

unable to follow directions
pulling at tubes
other

Age ≥ 18 years: ends in 4 hours

Age between 9-18 years: ends in 2 hours

Age ≤ 9 years: ends in 1 hour

Restraint Start and End Times

Restraint Starts

Time: Date:

Restraint Ends

Based on reason given above, add 4 hours, 2 hours, or 1 hour to start time
Time order ends:

When order expires, reevaluate patient and, if needed, re-order restraints using new copy of this order sheet.

Type of Restraint

Use least restrictive method

- Soft waist restraint
- Vest restraint
- Soft limb restraints
 - 1 limb
 - 2 limbs
 - 3 limbs
 - 4 limbs
- Leather limb restraints
- Seclusion
- Other

Resident/PA/CRNP:

Date:

Time:

Print Last Name:

Attending emergency physician (required):

Date:

Time:

Print Last Name: