

BEHAVIORAL EMERGENCY (P30)

The vast majority of patients are not violent, requiring only supportive care & transport. Responder & patient safety are paramount, especially when treating an aggressive or violent patient. **Restraints are to be used only to prevent injury & assure safety of the patient and/or responders.** EMS personnel shall make every effort to preserve the patient's health, safety, dignity, rights, & well-being.

	F	E	O	P	D
SCENE SAFETY	X	X	X	X	
ASSESSMENT	X	X	X	X	
VERBAL DE-ESCALATION: if possible. Use non-judgmental terminology, speak in a calm voice, and avoid direct eye contact.	X	X	X	X	
*APPROVED PHYSICAL RESTRAINTS: assure restraints do not compromise respirations, circulation, and neurological function. <u>Reassess & document distal neurovascular status every 15 minutes.</u>	X	X	X	X	
*CHEMICAL RESTRAINT: 0.1 mg/kg midazolam IV/IO/IM/IN. May be done prior to or in conjunction with approved physical restraints. May repeat every 5 – 10 minutes if systolic BP $\geq$ 100 and respiratory rate $\geq$ 12. DO NOT USE FOR PATIENTS YOUNGER THAN 12 YEARS OLD.				X	
PULSE OXIMETRY: apply and monitor.		X	X	X	
CAPNOGRAPHY: apply and monitor if chemical restraint administered.				X	
OXYGEN: if pulse oximetry < 94% or signs of respiratory distress or hypoperfusion.	X	X	X	X	
ECG MONITOR: lead placement may be delegated. Treat as indicated.				X	

*** Use of Patient Restraints, Policy # 580.00**

The following forms of restraint shall **NOT** be used by prehospital personnel:

1. Hard plastic ties or any restraint device requiring a key to remove with the exception of restraints applied by law enforcement.
2. Sandwiching patient between backboards, scoop-stretchers, or flat.
3. Restraining both a patient's hands and feet behind the patient, i.e., hog-tying.
4. Methods or other materials applied in a manner that could cause respiratory, vascular, or neurological compromise, including prone restraints.

Restraints applied by law enforcement require the officer's continued presence to ensure patient and prehospital personnel safety. The officer should accompany the patient in the ambulance or follow the ambulance.

EFFECTIVE: November 1, 2023

Provider Key: F = First Responder/EMR
P = Paramedic

E = EMT O = EMT Local Optional SOP
D = Base Hospital Physician Order Required