



Operational Policy		3305
Effective April 1, 2018		Expires March 31, 2019
Policy: Physical Restraint and Transport	Approval: Medical Director Reza Vaezazizi, MD	Signed
Applies To: EMT, AEMT, PM, MICN, BHP, EMS System	Approval: REMSA Director Bruce Barton	Signed

PURPOSE

The purpose of this policy is to set parameters for the use of physical restraint and transport of the restrained.

AUTHORITY

- [California Health and Safety Code - Division 2.5: Emergency Medical Services \[1797. - 1799.207.\]](#)
- [California Code of Regulations, Title 22. Social Security, Division 9. Prehospital Emergency Medical Services](#)
- [California Welfare and Institutions Code - Division 5: Community Mental Health Services \[5150\]](#)

Physical Restraint and Transport

Physical restraint is to be used only when necessary:

1. When a patient is a danger to others, or to him or herself.
 - a. Use the minimum restraint necessary to ensure safety.
2. When the patient is transported under California Code Section 5150.
 - a. Use four point wrist and ankle restraints.
 - b. Take the original, complete, signed, and valid 5150 form with the patient.
 - c. Transport the patient as clinically indicated by REMSA Policy.
 - i. Law enforcement may elect to meet the ambulance, follow in tandem, or ride in the patient compartment.
 - ii. Law enforcement remains legally responsible for the patient during transport.
3. When the patient is transported under arrest.
 - a. If restrained, but not handcuffed, law enforcement may follow the ambulance in tandem.
 - b. If handcuffed, law enforcement must ride in the patient compartment of the ambulance.
 - i. Do not allow handcuffing to the ambulance cot.

When wrist and/or ankle restraints are used:

1. Use only REMSA approved neoprene over nylon webbing with Velcro closure wrist and/or ankle restraints.
2. Distal circulation must be assessed at least every 15 minutes.
3. Restraint may not interfere with assessment or care of the patient.
 - a. Transport the restrained patient on the ambulance cot in low to high Fowler’s position.
 - b. Never restrain supine or prone.
 - i. Clinically indicated mechanical spinal immobilization is an exception for supine restraint.
 - c. Never restrain a patient on a spine board or lifting appliance to the ambulance cot.
 - i. Restrain to the spine board or lifting appliance only.
 - d. Never “hog-tie” or “backboard sandwich” a patient.
4. Fully document use of restraints on the patient care report (PCR/ePCR).