Physician Orders ADULT: Restraint VIOLENT Behavioral Plan

Restraint VIOLENT Behavioral Plan
Patient Care

- Restraint VIOLENT, Self-Destructive (behavioral 18 yrs and older)
  - Reason: Danger to Self or Others, Device: Soft, Location: Upper extremity, bilateral (DEF)*
  - Reason: Severely Violent/Agressive Behavior, Device: Soft, Location: All extremities
  - Reason: Danger to Self or Others, Device: Leather/Synthetic Leather, Location: All extremities
  - Reason: Severely Violent/Agressive Behavior, Device: Leather/Synthetic Leather, Location: All extremities and waist

- Restraint VIOLENT, Self-Destructive (behavioral 18 yrs and older)
  - Reason: Severely Violent/Agressive Behavior, Device: Seclusion, Location: N/A Seclusion (DEF)*
  - Reason: Danger to Self or Others, Device: Seclusion, Location: N/A Seclusion

Restraint Device Orders  9-17 years old, For 1 Hour(NOTE)*

- Restraint VIOLENT, Self-Destructive (behavioral age 9-17 yrs)
  - Reason: Danger to Self or Others, Device: Soft, Location: Upper extremity, bilateral (DEF)*
  - Reason: Severely Violent/Agressive Behavior, Device: Soft, Location: All extremities
  - Reason: Danger to Self or Others, Device: Leather/Synthetic Leather, Location: All extremities
  - Reason: Severely Violent/Agressive Behavior, Device: Leather/Synthetic Leather, Location: All extremities and waist

Medications

A RESTRAINT is a DRUG or MEDICATION when it is used as a RESTRICTION to manage the patient's behavior or RESTRICT the patient's freedom of movement and is NOT a standard treatment or DOSAGE for the patient's medical or psychiatric condition. (NOTE)*

Adult Medications (greater than or equal to 18 years old)(NOTE)*

- +1 Hours LORazepam
  - 2 mg, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year] (DEF)*
  - 4 mg, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year]

- +1 Hours midazolam
  - 5 mg, Injection, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year] (DEF)*
  - 5 mg, Injection, Nasal, once, STAT, Indication: Violent Restraint
  Comments: ED USE ONLY. To be given intranasally via Mucosal Atomization Device. May repeat x 1 dose. Use Concentrated IV product (5mg/mL). Max dose = 10mg
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☐ +1 Hours haloperidol
   ☐ 5 mg, Injection, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year] (DEF)*
   ☐ 10 mg, Injection, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year]

ZIPRASIDONE IS ON FORMULARY RESTRICTION FOR ADULT FACILITIES: must be prescribed by a psychiatrist, and documented failure of haloperidol(NOTE)*

☐ +1 Hours ziprasidone
   10 mg, Injection, IM, once, STAT, Indication: Violent Restraint [Greater Than or Equal To 18 year]

Pediatric Medications (less than 18 years old)(NOTE)*

☐ +1 Hours LORazepam
   0.1 mg/kg, Ped Injectable, IM, once, STAT, Indication: Violent Restraint, Max Dose = 4 mg [Less Than 18 year]

☐ +1 Hours midazolam
   0.15 mg/kg, Ped Injectable, IM, once, STAT, Indication: Violent Restraint, Max Dose = 5mg [Less Than 18 year] (DEF)*
   0.3 mg/kg, Injection, Nasal, once, STAT, Indication: Violent Restraint, Max Dose = 10 mg [Less Than 18 year]

   Comments: ED USE ONLY. To be given intranasally via Mucosal Atomization Device. Use concentrated IV product (5mg/mL). Max dose = 10 mg

☐ +1 Hours haloperidol
   0.1 mg/kg, Injection, IM, once, STAT, Indication: Violent Restraint, Max dose = 10 mg [Less Than 18 year]

☐ ziprasidone
   0.2 mg/kg, Injection, IM, once, STAT, Indication: Violent Restraint, Max dose = 10mg [5 - 8 year]

Date ___________________________ Time ___________________________ Physician’s Signature ___________________________ MD Number ___________________________

*Report Legend:
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
IVS - This component is an IV Set
NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub phase, see separate sheet
R-Required order