



Physical Restraint

What is Physical Restraint?

Any physical or mechanical device, material, or equipment attached or positioned adjacent to the patient's body that restrict freedom of movement or normal access to one's body.

This device is applied to patient to prevent them from hurting themselves, and interfering their medical treatment which is unsafe.



It is never use for staff convenience and facilities to control behavior

Physical restraint has the potential to cause physical harm. Inorder to reduce these risks, the health care team will make effort to support the patient using a variety of alternative measures before application of physical restraint. In addition, family play an important role in providing support for the patient for the discontinuation of the physical restraint as early as possible.

What are potential risks/side effects of physical restraint:

Physiological:

- Pressure injuries
- Bone loss
- Muscle weakness
- Contractures
- Loss of balance
- Increased risk of orthostatic hypotension
- Increased risk of respiratory infection
- Reduced heart and lung capacity
- Physical discomfort, increased pain
- Constipation

- Urinary incontinence
- Poor appetite
- Dehydration
- Death

Psychological/Emotional:

- Increased agitation, hostility, aggression and combativeness
- Feelings of humiliation
- Loss of dignity
- Increased confusion
- Fear

What are your roles as a family member or sitter in supporting the patient who is on physical restraint to facilitate its early discontinuation?

Stay with the patient to assist his/her needs.

Have a relaxing conversation with the patient.

Calm the patient with activities such as walking or other activities enjoyed by the patient as approved by the primary health care provider.

Play the patient's favorite music at the bedside.

Provide the patient's favorite snacks/food as allowed by the primary health care provider.

Communicate with the patient's needs to the health care team.

Look after the patient if physical restraint is off.

What measures can be done before application of physical restraint (Alternative Measures)?

- Increased monitoring by the multidisciplinary team such as frequent visits or confining the patient in a room closest to the nurse's station.
- Pain relief/comfort measures.
- Reduce noise levels, alarms noise, and unnecessary arousal of the patient.
- Provide diversional/relaxation techniques.
- Encourage position changes while patient is on bed.
- Provide constant reminders about the importance of not touching the tube, line or catheter and keep them out of the patient's view.
- Request for Spiritual Care.
- Use medication therapy

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