

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
25 MAY 06			RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING		
0730			Place Detainee in restraints as per current Guard Force Protocol		
			Reason For Restraint: Medical Necessity for Feeding		
			Medical Restraints order expires after 12 hours		
			Line of Sight Observation while in restraints		
			Circulation checks every 15 minutes for the first hour and then every hour		
			Offer restroom and fluids every 2 hours		
			Initiate Restraint Observation Checklist		
			GITMO D	(b)(3):10 USC §130b,(b)(6)	
			INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE		
			Reason for Restraint: Medical Necessity for Feeding		
			Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place him at greater risk during feeding using medical restraints.		
			Detainee will be observed continually while in medical restraints.		
			The Detainee is informed that medical restraints will not be necessary if he chooses to eat.		
			GITMO	(b)(3):10 USC §130b,(b)(6)	
					(b)(3):10 USC §130b,(b)(6)
					Noted 5/25/06 09

(continue on reverse side)

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank; rate; hospital or medical facility)

REGISTER NO. WARD NO.

DOCTOR'S ORDERS
MEDICAL RECORD

693^A

MEDICAL RECORD

PROGRESS NOTES

(Sign all orders)

DATE AND TIME

5/25/06

0957

INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE

Detainee placed in restraints as per current Guard Force Protocol.

Reason for Restraint: Medical Necessity

Detainee was advised by the Medical Staff that hunger striking is detrimental to his health.

His behavior is due to his refusal to eat and not due to mental status change or illness.

Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered food at every meal, yet he refuses to eat. Because the detainee refuses to eat, restraints were initiated for medical necessity for feeding.

The Detainee is informed that medical restraints will not be necessary if he chooses to eat.

(b)(3):10 USC §130b,(b)(6)

GITMO Nurse

5/25/06

0955

PROCEDURE NOTE: INSERTION OF FEEDING TUBE

Indication: Malnutrition; hunger strike

Under local anesthesia (viscous lidocaine, 2%), a 10 F 12 F enteral feeding tube was inserted in the R / L nostril using standard procedure. A stylet was was not used.

Patient tolerated the procedure well. Placement in stomach was confirmed by

insufflation and test dose of water. Successful procedure

(b)(3):10 USC §130b,(b)(6)

GITMO Dr. / Nurse

5/25/06

1035

DISCONTINUATION OF RESTRAINTS NOTE AFTER F

Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding and was released from restraints and returned to his cell in good condition. Detainee was

released from restraints at 1035 Detainee had / did not have physical injury from the restraint episode. Detainee reported the following problems

(b)(3):10 USC §130b,(b)(6)

GITMO Nurse

(cont. on reverse)

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME—last, first, middle; grade; rank; rate; hospital or medical facility)

PROGRESS NOTES
Medical Record

STANDARD FORM 608 (REV. 7-91)
Prescribed by GSA/ICMR, FPMR (41 CFR)

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 5/05/16

Limb Restrained:	Time In:	Time Out:	Limb Restrained:	Time In:	Time Out:
Left arm	<u>0957</u>	<u>1035</u>	Left leg	<u>0957</u>	<u>1035</u>
Right arm	<u>0958</u>	<u>1035</u>	Right leg	<u>0957</u>	<u>1025</u>

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Yelling or screaming | 9. Standing | 15. Requesting release | 21. Destructive Behavior |
| 4. Cursing | 10. Walking or pacing | 16. Harmful to self | 22. Disrobing |
| 5. Crying | 11. Lying down | 17. Threatening staff | 23. Urinating/defecating on floor |
| 6. Laughing | 12. Sitting | 18. Assaultive | 24. Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|-----------------------------|-----------------------------|---------------------------------|------------------------------|
| A. Meal offered | E. Toilet offered (q 2 hr)* | I. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | J. ROM (q 2 hr)* | N. Bath/shower refused |
| C. Fluids offered (q 2 hr)* | G. Medication accepted | K. RN observation (q 2 hr)* | O. Pt/staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200			1800		
0015			0615			1215			1815		
0030			0630			1230			1830		
0045			0645			1245			1845		
0100			0700			1300			1900		
0115			0715			1315			1915		
0130			0730			1330			1930		
0145			0745			1345			1945		
0200			0800			1400			2000		
0215			0815			1415			2015		
0230			0830			1430			2030		
0245			0845			1445			2045		
0300			0900			1500			2100		
0315			0915			1515			2115		
0330			0930			1530			2130		
0345			0945			1545			2145		
0400			1000	112 ER	(b)(3):10	1600			2200		
0415			1015	112 ER	USC	1615			2215		
0430			1030	112 ER	§130b,(1630			2230		
0445			1045		b)(6)	1645			2245		
0500			1100			1700			2300		
0515			1115			1715			2315		
0530			1130			1730			2330		
						1745			2345		
(b)(3):10 USC §130b,(b)(6)			Signature		Initials	Signature		Initials			

Xerostograph

0430

NAVHOSPOTFORMS 6500.1 Series

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)
JTF -JMG, Medical Department, Guantanamo Bay, Cuba

DATE

25MAY06

(b)(2)

1100

Progress Note -- Medical Staff

Patient offered a meal but refused - enteral feeds as recommended & voluntarily accepted oral food.
Chart reviewed. Detainee appears to be well hydrated. His condition is good.

- Detainee's new complaints.

Weight: 155.3 lbs (5/25/66)
Vitals: Temp: 97.5 HR: 88 /min RR: 14 /min BP: 114/66

EF Day #: 150

Goal daily kcal: 2210

Received:

1 can Jevity 1.5 and 3 cans Jevity 1.0 > BID

Compliant Non-compliant with enteral feeding Required medical restraints

The detainee was informed that the intent of the medical staff is to safely and effectively maximize nutrition and hydration. The detainee was advised that continued hunger striking is hazardous to his health.

PLAN: Continue with current regimen Close medical observation

Change to following:

JTF GTMO Detention Hospital (b)(3):10 USC 130b,(b)(6)

DETAINEE'S IDENTIFICATION NUMBER:

693

MEDICAL RECORD

DOCTOR'S ORDER
(Sign all orders)

DATE AND TIME

START

STOP

RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

24 MAR 06

0730

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

Place Detainee in restraints as per current Guard Force Protocol

Reason For Restraint: Medical Necessity for Feeding

Medical Restraints order expires after 12 hours

Line of Sight Observation while in restraints

Circulation checks every 15 minutes for the first hour and then every hour

Offer restroom and fluids every 2 hours

Initiate Restraint Observation Checklist

(b)(3):10 USC
GITMO Dr §130b,(b)(6)

INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE

Reason for Restraint: Medical Necessity for Feeding

Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There

is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place

him at greater risk during feeding using medical restraints.

Detainee will be observed continually while in medical restraints.

The Detainee is informed that medical restraints will not be necessary if he chooses to eat.

(b)(3):10 USC
GITMO Dr §130b,(b)(6)

W. J. ... 5/8/06 1400

(b)(3):10 USC
§130b,(b)(6)

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle, grade, rank, rate, hospital or medical facility)

WARD NO.

MEDICAL RECORDS

693^o

DATE AND TIME

5/24/06

1477

INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY- - NURSING NOTE

Detainee placed in restraints as per current Guard Force Protocol.

Reason for Restraint: Medical Necessity

Detainee was advised by the Medical Staff that hunger striking is detrimental to his health.

His behavior is due to his refusal to eat and not due to mental status change or illness.

Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered

food at every meal, yet he refuses to eat. Because the detainee refuses to eat,

restraints were initiated for medical necessity for feeding.

The Detainee is informed that medical restraints will not be necessary

if he chooses to eat.

(b)(3):10 USC §130b,(b)(6)

GITMO Nurse

5/24/06

1477

PROCEDURE NOTE: INSERTION OF FEEDING TUBE

Indication: Malnutrition; hunger strike

Under local anesthesia (viscous lidocaine, 2%), a 10 F 12 F enteral feeding tube was

inserted in the R / L nostril using standard procedure. A stylet was was not used.

Patient tolerated the procedure well. Placement in stomach was confirmed by

insufflation and test dose of water. Successful procedure (b)(3):10 USC §130b,(b)(6)

GITMO Dr. / Nur

5/24/06

1506

DISCONTINUATION OF RESTRAINTS NOTE AFTER

Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding

and was released from restraints and returned to his cell in good condition. Detainee was

released from restraints at 1526. Detainee had did not have physical injury from the restraint

episode. Detainee reported the following problems re (b)(3):10 USC §130b,(b)(6)

GITMO Nurse

PATIENT'S IDENTIFICATION (OR TYPE OR WRITE IN ENTRIES ONE NAME AND ONE ADDRESS, grade, rank, etc; hospital or medical facility)

PROGRESS NOTES
Medical Record

693p

MEDICAL RECORD

DOCTOR'S ORDER
(Sign all orders)

DATE AND TIME

START

STOP

RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

24 MAY 06

0730

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

Place Detainee in restraints as per current Guard Force Protocol

Reason For Restraint: Medical Necessity for Feeding

Medical Restraints order expires after 12 hours

Line of Sight Observation while in restraints

Circulation checks every 15 minutes for the first hour and then every hour

Offer restroom and fluids every 2 hours

Initiate Restraint Observation Checklist

GITMO Dr.

(b)(3):10 USC
§130b,(b)(6)

INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE

Reason for Restraint: Medical Necessity for Feeding

Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There

is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place

him at greater risk during feeding using medical restraints.

Detainee will be observed continually while in medical restraints.

The Detainee is informed that medical restraints will not be necessary if he chooses to eat.

GITMO Dr.

(b)(3):10 USC
§130b,(b)(6)

Noted 5/24/06 09

(b)(3):10 USC
§130b,(b)(6)

PATIENT'S IDENTIFICATION (FOR TYPED OR WRITTEN ENTRIES GIVE: NAME--last, first, middle; grade; rank, rate; hospital or medical facility)

WARD NO.

COPIED
MEDICAL RECORD

693^A

MEDICAL RECORD

(Sign all orders)

DATE AND TIME

5/24/06

0945

INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE

Detainee placed in restraints as per current Guard Force Protocol.

Reason for Restraint: Medical Necessity

Detainee was advised by the Medical Staff that hunger striking is detrimental to his health.

His behavior is due to his refusal to eat and not due to mental status change or illness.

Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered

food at every meal, yet he refuses to eat. Because the detainee refuses to eat,

restraints were initiated for medical necessity for feeding.

The Detainee is informed that medical restraints will not be necessary

if he chooses to eat.

GITMO Nurse

(b)(3):10 USC §130b,(b)(6)

5/24/06

0948

PROCEDURE NOTE: INSERTION OF FEEDING TUBE

Indication: Malnutrition; hunger strike

Under local anesthesia (viscous lidocaine, 2%), a 10 F / 12 F enteral feeding tube was inserted in the R / L nostril using standard procedure. A stylet was was not used.

Patient tolerated the procedure well. Placement in stomach was confirmed by

insufflation and test dose of water. Successful procedure.

GITMO Dr. / Nur

(b)(3):10 USC §130b,(b)(6)

ons.

5/24/06

1055

DISCONTINUATION OF RESTRAINTS NOTE AFTER

TE

Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding

and was released from restraints and returned to his cell in good condition. Detainee was

released from restraints at 1055. Detainee had did not have physical injury from the restraint

episode. Detainee reported the following problem: int episode.

GITMO Nurse

(b)(3):10 USC §130b,(b)(6)

PATIENT IDENTIFICATION (FROM TYPE) OR WRITTEN AUTHORITY (GIVE NAME AND TITLE, grade, rank, rate, no. and of medical facility)

PROGRESS NOTES
Medical Record

693a

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 5/24/00 Limb Restrained: Time In: Time Out: Limb Restrained: Time In: Time Out:

 Left arm 0945 1025 Left leg 0945 1025

 Right arm 0945 1025 Right leg 0945 1025

Observation: (every 15 minutes)*. Select the appropriate codes and initial each entry.

- | | | | |
|--|---|---|--|
| 1. <input checked="" type="checkbox"/> Loss of sight | 7. <input checked="" type="checkbox"/> Talking | 13. <input type="checkbox"/> Quiet | 19. <input type="checkbox"/> Crawling |
| 2. <input type="checkbox"/> Beating or kicking door | 8. <input type="checkbox"/> Mumbling incoherently | 14. <input type="checkbox"/> Sleeping | 20. <input type="checkbox"/> Noncommunicative |
| 3. <input type="checkbox"/> Yelling or screaming | 9. <input type="checkbox"/> Standing | 15. <input type="checkbox"/> Requesting release | 21. <input type="checkbox"/> Destructive Behavior |
| 4. <input type="checkbox"/> Cursing | 10. <input type="checkbox"/> Walking or pacing | 16. <input type="checkbox"/> Harmful to self | 22. <input type="checkbox"/> Disrobing |
| 5. <input type="checkbox"/> Crying | 11. <input type="checkbox"/> Lying down | 17. <input type="checkbox"/> Threatening staff | 23. <input type="checkbox"/> Urinating/defecating on floor |
| 6. <input type="checkbox"/> Laughing | 12. <input checked="" type="checkbox"/> Sitting | 18. <input type="checkbox"/> Assaultive | 24. <input type="checkbox"/> Other: See Notes (SF 509) |

Monitoring/Care Provided: Select the appropriate codes and initial each entry.

- | | | | |
|--|--|---|---|
| A. <input type="checkbox"/> Meal offered | E. <input type="checkbox"/> Toilet offered (q 2 hr)* | <input checked="" type="checkbox"/> I. Circulation checks (q 2 hr)* | M. <input type="checkbox"/> Bath/shower (qd)* |
| B. <input type="checkbox"/> Meal refused | F. <input type="checkbox"/> Toilet refused | <input checked="" type="checkbox"/> J. ROM (q 2 hr)* | N. <input type="checkbox"/> Bath/shower refused |
| C. <input type="checkbox"/> Fluids offered (q 2 hr)* | G. <input type="checkbox"/> Medication accepted | <input checked="" type="checkbox"/> K. RN observation (q 2 hr)* | O. <input type="checkbox"/> Pv/staff interaction |
| D. <input type="checkbox"/> Fluids refused | H. <input type="checkbox"/> Medication refused | L. <input type="checkbox"/> Physician Visit | P. <input type="checkbox"/> VS (q 4 hr)* |
| *Minimal Time Requirements | | | Q. <input type="checkbox"/> Other: See Notes (SF 509) |

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200			1800		
0015			0615			1215			1815		
0030			0630			1230			1830		
0045			0645			1245			1845		
0100			0700			1300			1900		
0115			0715			1315			1915		
0130			0730			1330			1930		
0145			0745			1345			1945		
0200			0800			1400			2000		
0215			0815			1415			2015		
0230			0830			1430			2030		
0245			0845			1445			2045		
0300			0900			1500			2100		
0315			0915			1515			2115		
0330			0930			1530			2130		
0345			0945			1545			2145		
0400			1000			1600			2200		
0415			1015			1615			2215		
0430			1030			1630			2230		
0445			1045			1645			2245		
0500			1100			1700			2300		
0515			1115			1715			2315		
			1130			1730			2330		
			1145			1745			2345		
<div style="border: 1px solid black; padding: 5px;">(b)(3):10 USC §130b,(b)(6)</div>			Signature		Initials	Signature		Initials			

693a