

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
23 APR 07	0730		<b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>		
			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	(b)(3):10 USC §130b,(b)(6)	
			Initiate Restraint Observation Checklist		
			GITMO Dr.		
			<b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>		
			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)	

(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

MEDICAL RECORD	
DATE AND TIME	PROGRESS NOTES (Sign all orders)
	<b>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</b>
4/23/26	Detainee placed in restraints as per current Guard Force Protocol.
1413	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)
	<b>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</b>
	Indication: Malnutrition; hunger strike
	Under local anesthesia (viscous lidocaine, 2%), a 10 F / <u>X</u> 12 F enteral feeding tube was
	inserted in the <u>X</u> R / L nostril using standard procedure. A stylet was <u>was not used</u> .
	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
	<b>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</b>
	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 1446 Detainee had <u>did not have</u> physical injury from the restraint
	episode. Detainee reported the following problem (b)(3):10 USC §130b,(b)(6)
	GITMO Nurse

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

PROGRESS NOTES  
Medical Record

693

# **RESTRAINT OBSERVATION SHEET** **U.S. Naval Hospital Guantanamo Bay, Cuba**

Date: 4/23/00      Limb Restrained:      Time In:      Time Out:      Limb Restrained:      Time In:      Time Out:  
                                  Left arm      1413      1446      Left leg      1413      1446  
                                  Right arm      1413      1446      Right leg      1413      1446

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)*              |
|                             |                             |                                 | Q. Other: See Notes (SF 509) |

\*Minimal Time Requirements

Time	Code	Initials	Time	Code	Initials	Time	Code	Initials
0000			0600			1200		
0015			0615			1215		
0030			0630			1230		
0045			0645			1245		
0100			0700			1300		
0115			0715			1315		
0130			0730			1330		
0145			0745			1345		
0200			0800			1400		
0215			0815			1415	I, I, Z, I, K	
0230			0830			1430	I, I, Z, I, K	
0245			0845			1445	I, I, Z, I, K	
0300			0900			1500		
0315			0915			1515		
0330			0930			1530		
0345			0945			1545		
0400			1000			1600		
0415			1015			1615		
0430			1030			1630		
0445			1045			1645		
0500			1100			1700		
0515			1115			1715		
0530			1130			1730		
0545			1145			1745		

(b)(3):10 USC §130b,(b)(6)

Signature	Initials	Signature	Initials

Addressograph

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MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
23	1806		<b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>		
17	30		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>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>		
			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.		

(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			
4/23/06		INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - NURSING NOTE	
0403-7		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	
		PROCEDURE NOTE: INSERTION OF FEEDING TUBE	
		Indication: Malnutrition; hunger strike	
		Under local anesthesia (viscous lidocaine, 2%), a 10 F / <del>12 F</del> enteral feeding tube was	
		inserted in the <del>R</del> / L nostril using standard procedure. A stylet was <del>was not used</del> .	
		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	
		DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE	
		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 0932. Detainee had <del>did not have</del> physical injury from the restraint	
		episode. Detainee reported the following problem (b)(3):10 USC §130b,(b)(6) aint episode.	
		GITMO Nurse	

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

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PROGRESS NOTES  
Medical Record

STANDARD FORM 509 (REV. 7-81)  
Prescribed by GSA/ICMR, FIRM (41CR)

# RESTRAINT OBSERVATION SHEET U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 4/23/06      Limb Restrained:      Time In:      Time Out:      Limb Restrained:      Time In:      Time Out:  
Left arm      0937      0932      Left leg      0937      0932  
Right arm      0937      0932      Right leg      0937      0932

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)*              |
|                             |                             |                                 | Q. Other: See Notes (SF 509) |

\*Minimal Time Requirements

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	112, I, K	(b)(3):1	1430			2030		
0245			0845	1, 12, I, K	0 USC §130b,(	1445			2045		
0300			0900	1, 12, I, K	b)(6)	1500			2100		
0315			0915	1, 12, I, K		1515			2115		
0330			0930	1, 12, I, K		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		
0530			1130			1730			2330		
			1145			1745			2345		
(b)(3):10 USC §130b,(b)(6)			Signature		Initials	Signature		Initials			

Monograph

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## MEDICAL RECORD

## CHRONOLOGICAL RECORD OF MEDICAL CARE

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

DATE

23APR06

(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 has new complaints

Weight: 152.7 lbs (4/23/06)

Vitals:

Temp: 98 F

HR: 80 /min

RR: 16 /min

BP: 123/76

EF Day #: 1/8

Goal daily kcal: 2840

Received:

4 cans Jevity 1.5 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:

→ Routine labs in am

(b)(3):10 USC §130b,(b)(6)

JTF GTMO Detention Hospital

DETAINEE'S IDENTIFICATION NUMBER:

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CHRONOLOGICAL RECORD OF MEDICAL CARE  
MEDICAL RECORD  
STANDARD FORM 600 (rev. 9/05)

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
22 APR 06			<b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>		
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 Dr. (b)(3):10 USC §130b,(b)(6)		
			<b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>		
			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)		

(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



MEDICAL RECORD		PROGRESS NOTES (Sign all orders)	
DATE AND TIME			
4/22/04 1512		<b>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - NURSING NOTE</b> Detainee placed in restraints as per current Guard Force Protocol. Reason for Restraint: <u>Medical Necessity</u> 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 <span style="border: 1px solid black; padding: 2px;">(b)(3):10 USC §130b,(b)(6)</span>	
4/22/04 1519		<b>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</b> Indication: Malnutrition; hunger strike Under local anesthesia (viscous lidocaine, 2%), a 10 F / 12 F enteral feeding tube was inserted in the R <u>L</u> nostril using standard procedure. A stylet was / <u>was not used</u> . Patient tolerated the procedure well. Placement in stomach was confirmed by insufflation and test dose of water. Successful procedure. GITMO Dr. / Nurse <span style="border: 1px solid black; padding: 2px;">(b)(3):10 USC §130b,(b)(6)</span>	
4/22/04 1604		<b>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</b> 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 1604. Detainee had / <u>did not have physical injury</u> from the restraint episode. Detainee reported the following problems <span style="border: 1px solid black; padding: 2px;">(b)(3):10 USC §130b,(b)(6)</span> GITMO Nurse <span style="border: 1px solid black; padding: 2px;">(b)(3):10 USC §130b,(b)(6)</span>	

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 505 (REV. 7-91)  
Prescribed by GSA/ICMR, FIRM (41CR)

**RESTRAINT OBSERVATION SHEET**

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 4/22/04      Limb Restrained:      Time In:      Time Out:      Limb Restrained:      Time In:      Time Out:

Left arm      1512      1608      Left leg      1512      1608

Right arm      1512      1608      Right leg      1512      1608

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. Pw/staff interaction      |
| D. Fluids refused           | H. Medication refused       | L. Physician Visit              | P. VS (q 4 hr)*              |
|                             |                             |                                 | Q. Other: See Notes (SF 509) |

\*Minimal Time Requirements

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	1112, 1112	(b)(3):10	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	1112, 1112	(b)(3):10	2115		
0330			0930			1530	1112, 1112	USC	2130		
0345			0945			1545	1112, 1112	§130b, (b)(6)	2145		
0400			1000			1600	1112, 1112		2200		
0415			1015			1615			2215		
0430			1030			1630			2230		
0445			1045			1645			2245		
0500			1100			1700			2300		
0515			1115			1715			2315		
0530			1130			1730			2330		
0545			1145			1745			2345		
Signature		Initials	Signature		Initials	(b)(3):10 USC §130b, (b)(6)					

Addressograph

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