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USNE GUANTANAMO ~~det~~ CUBA

23 Feb 200501308

Page 1

Personal Data - Privacy Act of 1974 (2L 93-579)

Review Results

Report requested by: (b)(3):10 USC

D, JTF000693  
Ph:

20/858-00-0693

M/2

Reg #:

Military Unit: UNKNOWN

21 Feb 05 @ 2114 (Coll)

URINE

|                           |            |               |
|---------------------------|------------|---------------|
| COLOR . . . . .           | YELLOW     |               |
| APPEARANCE . . . . .      | CLEAR      |               |
| GLUCOSE-URINE . . . . .   | NEGATIVE   | (Neg.-Trace)  |
| BILIRUBIN . . . . .       | NEGATIVE   | (neg)         |
| KETONES . . . . .         | NEGATIVE   | (Neg)         |
| SG. . . . .               | 1.010      | (1.004-1.037) |
| BLOOD-URINE . . . . .     | NEGATIVE   | (Neg)         |
| URINE pH. . . . .         | 7.         | (5.0-8.0).    |
| PROTEIN . . . . .         | NEGATIVE   | (Neg-Trace)   |
| UROBILINOGEN. . . . .     |            | (0.2)         |
|                           | 0.2 E.U/DL |               |
| NITRITE . . . . .         | NEGATIVE   | (Neg)         |
| LEUKOCYTE ESTER . . . . . | NEGATIVE   | (Neg)         |

=====  
 I=In H=H: \*Critical R Resist S=Susc MS=Mod Susc T=Intermed  
 []=Uncert /A=Amended Comments= (O)rdor, (I)nterpretations, (R)esult  
 =====

\*\*\* End of Report \*\*\*[w

Personal Data - Privacy Act of 1974 (PL 93-579)

PATIENT LAB INQUIRY

For: 14 Aug 00 - 31 Jan 03

Report requested by: (b)(3):10 USC §1306(b)(6)

D, JTF000693  
Ph:

20/888-00-0693

M/7m

Reg #:

Military Unit: UNKNOWN

020618 PHI 1831

Col: 18Jun02@1945

SERUM

Hop: (b)(3):10 USC §1306(b)(6)

Req Loc: FLEET HC

Order comment: RF 6168/9/

C:JMW05Jul02@1326

HIV-1 AB. . . . .  
NEGATIVE

Order Required Data:

PRISONER/DETAINEE

Interpretations:

ACCESSION AREA N22/N29 (NAVY HIV PROGRAM) SPECIMENS SUBMITTED TO VIROMED FOR TESTING. RESULTS WILL BE MAILED FROM VIROMED TO SUBMITTING ACTIVITY.

\*\*\*\*\*  
L=Lo H=Hi \*Critical R=Resist S=Susc MS=Mod Susc I=Intermed

ISN: 888-00-0693

# RECORD INACTIVATED

(DATE) 10/18/06

SIGNED:

(b)(3):10 USC §130b,(b)(6)

SMO

DENTAL OFFICER

| MEDICAL RECORD |        |    | DOCTOR'S ORDERS<br>(Sign all orders)  |                            |                      |
|----------------|--------|----|---|----------------------------|----------------------|
| DATE AND TIME  |        | RX | DRUG ORDERS   | DOCTOR'S SIGNATURE         | NURSE'S SIGNATURE    |
| START          | STOP   |    |   |                            |                      |
| 1/6            | Jan 16 | 06 | <b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>  |                            |                      |
|                | 0714   |    | Place Detainee in (b)(1) Sec  |                            |                      |
|                |        |    | Reason For Restraint: Medical Necessity for Feeding   |                            |                      |
|                |        |    | Medical Restraints: order expires after 12 hours  |                            |                      |
|                |        |    | Line of Sight observation while in restraints and record 15-minute checks while in restraints   |                            |                      |
|                |        |    | Circulation Checks every 15 mins for the first hour then every hour.  |                            |                      |
|                |        |    | Vital sign checks immediately after restraint and every 4 hours   |                            |                      |
|                |        |    | Offer restroom and fluids every 2 hours   |                            |                      |
|                |        |    | Initiate Restraint Observation Checklist  |                            |                      |
|                |        |    | (Orders to be signed by Licensed Independent Practitioner (LIP) within 1 hour of restraints)  |                            |                      |
|                |        |    | NOTED: 1/16/20 C 0720   | (b)(3):10 USC §130b,(b)(6) | G.M.D. (b)(3):10 USC |
| 1/6            | (b)(1) | 06 | <b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>   |                            |                      |
|                | 0714   |    | 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 not evidence that medications or a medical process are contributing to 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.  |                            |                      |
|                |        |    | Detainee was told that he will remain in restraints until feed and post feed observation time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary feeding in medical restraints will no longer be required.   |                            |                      |
|                |        |    |   | G.M.D.                     | (b)(3):10 USC        |

(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.

673 AM

DOCTOR'S ORDERS  
MEDICAL RECORD

| MEDICAL RECORD |  | PROGRESS NOTES<br>(Sign all orders)   |  |
|----------------|--|---|--|
| DATE AND TIME  |  |   |  |
| 1/16/05        |  |   |  |
| 0757           |  | <b>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</b>                              |  |
|                |  | Detainee placed in <b>(b)(1) Sec</b> 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.               |  |
|                |  | Detainee will be observed continually and he will be reminded of how his behavior must              |  |
|                |  | change (he must eat voluntarily) to avoid the use of medical restraints for present                 |  |
|                |  | and future feedings. Detainee was told that he will remain in medical                               |  |
|                |  | restraints until feed and post feed observation (60-120 minutes)                                    |  |
|                |  | (b)(3):10 USC<br>§130b,(b)(6)   |  |
|                |  |   |  |
|                |  | <b>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</b>  |  |
|                |  | Indication: Malnutrition; hunger strike   |  |
|                |  | Under local anesthesia (viscous lidocaine, 2%), (b)(3):10 USC                                       |  |
|                |  | F-12 E enteral feeding tube was   |  |
|                |  | inserted in the (b)(3):10 USC nostril using standard procedure. A style (b)(3):10 USC was not used. |  |
|                |  | Patient tolerated the procedure well. Placement in stomach was confirmed by                         |  |
|                |  | insufflation and test dose of water. Successful procedure without complications.                    |  |
|                |  | (b)(3):10 USC<br>§130b,(b)(6)   |  |
|                |  |   |  |
|                |  | <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 11:49. Detainee had (did not have physical injury from the restraint    |  |
|                |  | episode. Detainee reported the following problems related to the restraint episode:                 |  |
|                |  | (b)(3):10 USC<br>§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)

PROGRESS NOTES  
Medical Record

STANDARD FORM 503 (REV. 7-9-01)  
Published by GSA/COMPTON, FEDERAL ACQUISITION

# RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

NAVHOSP FORM 77-00111

Date: 1/16/06

Limb Restrained:  
 Left arm: Time In: 0750 Time Out: 0949  
 Right arm: Time In: 0750 Time Out: 0949

Limb Restrained:  
 Left leg: Time In: 0750 Time Out: 0949  
 Right leg: Time In: 0750 Time Out: 0949

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

- |                            |                          |                                   |
|----------------------------|--------------------------|-----------------------------------|
| 1. Line of sight           | 7. Talking               | 13. Quiet                         |
| 2. Beating or kicking door | 8. Mumbling incoherently | 14. Sleeping                      |
| 3. Yelling or screaming    | 9. Standing              | 15. Requesting release            |
| 4. Cursing                 | 10. Walking or pacing    | 16. Harmful to self               |
| 5. Crying                  | 11. Lying down           | 17. Threatening staff             |
| 6. Laughing                | 12. Sitting              | 18. Assaultive                    |
|                            |                          | 19. Crawling                      |
|                            |                          | 20. Noncommunicative              |
|                            |                          | 21. Destructive Behavior          |
|                            |                          | 22. Disrobing                     |
|                            |                          | 23. Urinating/defecating on floor |
|                            |                          | 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 |      | (b)(3):10 USC | 1400 |      |          | 2000 |      |          |
| 0215 |      |          | 0815 |      | §130b         | 1415 |      |          | 2015 |      |          |
| 0230 |      |          | 0830 |      | (b)(6)        | 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 |      |          |
| 0530 |      |          | 1130 |      |               | 1730 |      |          | 2330 |      |          |
| 0545 |      |          | 1145 |      |               | 1745 |      |          | 2345 |      |          |

Signature: \_\_\_\_\_ Initials: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Initials: \_\_\_\_\_  
 (b)(3):10 USC  
 §130b,(b)(6)  
 (b)(3):10 USC  
 §130b.(

693 am

| MEDICAL RECORD |      |    | DOCTOR'S ORDERS<br>(Sign all orders)  |                    |                            |
|----------------|------|----|---|--------------------|----------------------------|
| DATE AND TIME  |      | RX | DRUG ORDERS   | DOCTOR'S SIGNATURE | NURSE'S SIGNATURE          |
| START          | STOP |    |   |                    |                            |
| 15 Jan 06      |      |    | <b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>  |                    |                            |
|                | 1315 |    | Place Detainee in <b>(b)(1) Sec</b>   |                    |                            |
|                |      |    | Reason For Restraint: Medical Necessity for Feeding   |                    |                            |
|                |      |    | Medical Restraints: order expires after 12 hours  |                    |                            |
|                |      |    | Line of Sight observation while in restraints and record 15-minute checks while in restraints   |                    |                            |
|                |      |    | Circulation Checks every 15 mins for the first hour then every hour.  |                    |                            |
|                |      |    | Vital sign checks immediately after restraint and every 4 hours   |                    |                            |
|                |      |    | Offer restroom and fluids every 2 hours   |                    |                            |
|                |      |    | Initiate Restraint Observation Checklist  |                    |                            |
|                |      |    | (Orders to be signed by Licensed Independent Practitioner (LIP) within 1 hour of restraints)  |                    |                            |
|                |      |    |   | <i>C. M. J.</i>    | (b)(3):10 USC §130b,(b)(6) |
| 15 Jan 06      |      |    | <b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>   |                    |                            |
|                | 1315 |    | 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 not evidence that medications or a medical process are contributing to 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.  |                    |                            |
|                |      |    | Detainee was told that he will remain in restraints until feed and post feed observation time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary feeding in medical restraints will no longer be required.   |                    |                            |
|                |      |    |   | <i>C. M. J.</i>    | (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. |
|--|--|--|--------------|----------|

693 PM

DOCTOR'S ORDERS  
MEDICAL RECORD

PROGRESS NOTES  
(Sign all orders)

MEDICAL RECORD  
DATE AND TIME

1/15/06  
1430

INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE

Detainee placed in (b)(1) Sec 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.

Detainee will be observed continually and he will be reminded of how his behavior must

change (he must eat voluntarily) to avoid the use of medical restraints for present

and future feedings. Detainee was told that he will remain in medical

restraints until feed and post feed observation (60-120 minutes)

(b)(3):10 USC  
§130b,(b)(6)

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 without complications.

(b)(3):10 USC  
§130b,(b)(6)

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 1630 Detainee had / did not have physical injury from the restraint

episode. Detainee reported the following problems related to the restraint episode.

(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)

PROGRESS NOTES  
Medical Record

STANDARD FORM 609 (REV. 7-91)  
Prescribed by GSA/COM. FORM 609



# RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 1/15/06      Limb Restrained:      Time In:      Time Out:      Limb Restrained:      Time In:      Time Out:

   Left arm      1430      1630      Left leg      1430      1630

   Right arm      1430      1630      Right leg      1430      1630

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 | 1/12 K | (b)(3):1  | 2030     |      |          |
| 0245      |          |                            | 0845 |      |          | 1445 | 1/12 K | 0 USC     | 2045     |      |          |
| 0300      |          |                            | 0900 |      |          | 1500 | 1/12 K | §130b.(   | 2100     |      |          |
| 0315      |          |                            | 0915 |      |          | 1515 | 1/12 K | b)(6)     | 2115     |      |          |
| 0330      |          |                            | 0930 |      |          | 1530 | 1/12 K |           | 2130     |      |          |
| 0345      |          |                            | 0945 |      |          | 1545 | 1/12 K |           | 2145     |      |          |
| 0400      |          |                            | 1000 |      |          | 1600 | 1/12 K |           | 2200     |      |          |
| 0415      |          |                            | 1015 |      |          | 1615 | 1/12 K |           | 2215     |      |          |
| 0430      |          |                            | 1030 |      |          | 1630 | 1/12 K |           | 2230     |      |          |
| 0445      |          |                            | 1045 |      |          | 1645 |        |           | 2245     |      |          |
| 0500      |          |                            | 1100 |      |          | 1700 |        |           | 2300     |      |          |
| 0515      |          |                            | 1115 |      |          | 1715 |        |           | 2315     |      |          |
| 0530      |          |                            | 1130 |      |          | 1730 |        |           | 2330     |      |          |
| 0545      |          |                            | 1145 |      |          | 1745 |        |           | 2345     |      |          |
| Signature | Initials | (b)(3):10 USC §130b,(b)(6) |      |      |          |      |        | Signature | Initials |      |          |

Address graph

| MEDICAL RECORD |      |    | DOCTOR'S ORDERS<br>(Sign all orders)  |                    |                            |
|----------------|------|----|---|--------------------|----------------------------|
| DATE AND TIME  |      | RX | DRUG ORDERS   | DOCTOR'S SIGNATURE | NURSE'S SIGNATURE          |
| START          | STOP |    |   |                    |                            |
| 15 Jan 06      |      |    | <b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>  |                    |                            |
|                | 0715 |    | Place Detainee in <b>(b)(1) Sec</b>   |                    |                            |
|                |      |    | Reason For Restraint: Medical Necessity for Feeding   |                    |                            |
|                |      |    | Medical Restraints: order expires after 12 hours  |                    |                            |
|                |      |    | Line of Sight observation while in restraints and record 15-minute checks while in restraints   |                    |                            |
|                |      |    | Circulation Checks every 15 mins for the first hour then every hour.  |                    |                            |
|                |      |    | Vital sign checks immediately after restraint and every 4 hours   |                    |                            |
|                |      |    | Offer restroom and fluids every 2 hours   |                    |                            |
|                |      |    | Initiate Restraint Observation Checklist  |                    |                            |
|                |      |    | (Orders to be signed by Licensed Independent Practitioner (LIP) within 1 hour of restraints)  |                    |                            |
|                |      |    |   | <i>[Signature]</i> | (b)(3):10 USC §130b,(b)(6) |
| 15 Jan 06      |      |    | <b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>   |                    |                            |
|                | 0715 |    | 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 not evidence that medications or a medical process are contributing to 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.  |                    |                            |
|                |      |    | Detainee was told that he will remain in restraints until feed and post feed observation time (60-120 minutes) is completed. Detainee understands that if he eats, that involuntary feeding in medical restraints will no longer be required.   |                    |                            |
|                |      |    |   | <i>[Signature]</i> | (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

693 AM