

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 2/27/06 Limb Restrained: Time In: Time Out: Limb Restrained: Time In: Time Out:
 Left arm: 1540 1720 Left leg: 1540 1728
 Right arm: 1540 1728 Right leg: 1540 1728

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

- | | | |
|-----------------------------|--------------------------|-----------------------------------|
| 1. Line of sight | 7. Talking | 13. Quiet |
| 2. Beating or kicking doors | 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)* |
| | | | Q. Other: See Notes (SF 509) |

*Minimum 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 | | | 1430 | | | 2030 | | |
| 0245 | | | 0845 | | | 1445 | | | 2045 | | |
| 0300 | | | 0900 | | | 1500 | | | 2100 | | |
| 0315 | | | 0915 | | | 1515 | | | 2115 | | |
| 0330 | | | 0930 | | | 1530 | 112, 13, E, V | (b)(3): 10 USC §130b, (b)(6) | 2130 | | |
| 0345 | | | 0945 | | | 1545 | 112, 13 | | 2145 | | |
| 0400 | | | 1000 | | | 1600 | 112, 13 | | 2200 | | |
| 0415 | | | 1015 | | | 1615 | 112, 13, E, V | | 2215 | | |
| 0430 | | | 1030 | | | 1630 | 112, 13 | | 2230 | | |
| 0445 | | | 1045 | | | 1645 | 112, 13 | | 2245 | | |
| 0500 | | | 1100 | | | 1700 | 112, 13, E, V | | 2300 | | |
| 0515 | | | 1115 | | | 1715 | 112, 13 | | 2315 | | |
| 0530 | | | 1130 | | | 1730 | 112, 13, E, V | | 2330 | | |
| 0545 | | | 1145 | | | 1745 | 112, 13, E, V | | 2345 | | |
| Signature | | Initials | Signature | | Initials | Signature | | Initials | Signature | | Initials |
| | | | | | | | | | | | |

(b)(3):10 USC §130b,(b)(6)

693

MEDICAL RECORD

DOCTOR'S ORDERS

(Sign all orders)

| DATE AND TIME | | RX | DRUG ORDERS | DOCTOR'S SIGNATURE | NURSE'S SIGNATURE |
|-----------------|------|----|---|--------------------|-------------------|
| START | STOP | | | | |
| | | | RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING | | |
| 2/17/06 0730 | | | 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. | | |
| | | | Circulation checks every 15 mins for the first hour and then every hour. | | |
| | | | Vital signs checks immediately after restraints and every 1 hour. | | |
| | | | Offer restroom and fluids every 2 hours | | |
| | | | Initiate Restraint Observation Checklist | | |
| | | | (Orders to be signed by Licensed Independent (b)(3):10 USC §130b,(b)(6) LIP) within 1 hour of restraints) | | |
| | | | (b)(3):10 USC §130b,(b)(6) GITMO Dr. (b)(3):10 USC §130b,(b)(6) | | |
| | | | INIT: (b)(3):10 USC §130b,(b)(6) STRAINTS -- MEDICAL C | | |
| | | | 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. | | |
| | | | 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. | | |
| | | | (b)(3):10 USC §130b,(b)(6) GITMO Dr. (b)(3):10 USC §130b,(b)(6) | | |

(continuation 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

WFB am

| MEDICAL RECORD | | PROGRESS NOTES (Sign all orders) | |
|----------------|--|---|--|
| DATE AND TIME | | | |
| 2/27/06 | | | |
| 0814 | | INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE | |
| | | Detainee placed in (b)(1) Sec 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. | |
| | | 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) | |
| | | GITMO Nurse (b)(3):10 USC §130b,(b)(6) | |
| 2/27/06 | | PROCEDURE NOTE: INSERTION OF FEEDING TUBE | |
| 0819 | | Indication: Malnutrition; hunger strike | |
| | | Under local anesthesia (viscous lidocaine 2%), a 10 F <u>12 F</u> enteral feeding tube was | |
| | | inserted in the <u>R</u> / <u>L</u> nostril using standard procedure. A stylet was <u>not</u> used. | |
| | | Patient tolerated the procedure well. Placement in stomach was confirmed by | |
| | | insufflation and test dose of water. Successful procedure without complications. | |
| | | GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6) | |
| 2/27/06 | | DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE | |
| 1812 | | 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 <u>1812</u> . Detainee had <u>did not have</u> physical injury from the restraint | |
| | | episode. Detainee reported the following problems related to the restraint episode: | |
| | | GITMO Nurse (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)

PROGRESS NOTES
Medical Record

U93

STANDARD FORM 503 (REV. 1-94)
Prescribed by GSACOMP, FPOB (410P)

GTMO JMG 585

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 2/27/00

| | | | |
|---|---|---|---|
| Limb Restrained: Left arm: <u>0800</u> Right arm: <u>0800</u> | Time In: <u>1012</u> Time Out: <u>1012</u> | Limb Restrained: Left leg: <u>0800</u> Right leg: <u>0800</u> | Time In: <u>1012</u> Time Out: <u>1012</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 down | 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)* | L. Circulation checks (q 2 hr)* | M. Bath/shower (qd)* |
| B. Meal refused | F. Toilet refused | I. 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)* |
| *Minimum Time Requirements | | | Q. Other: See Notes (SF 509) |

| Time | Code | Initials | Time | Code | Initials | Time | Code | Initials | Time | Code | Initials |
|-----------|----------|----------------------------|----------|-----------|---------------------|-----------|----------|-----------|----------|-----------|----------|
| 0600 | | | 0600 | | | 1200 | | | 1800 | | |
| 0615 | | | 0615 | | | 1215 | | | 1815 | | |
| 0630 | | | 0630 | | | 1230 | | | 1830 | | |
| 0645 | | | 0645 | | | 1245 | | | 1845 | | |
| 0700 | | | 0700 | | | 1300 | | | 1900 | | |
| 0715 | | | 0715 | | | 1315 | | | 1915 | | |
| 0730 | | | 0730 | | | 1330 | | | 1930 | | |
| 0745 | | | 0745 | | | 1345 | | | 1945 | | |
| 0800 | | | 0800 | | (b)(3):10 USC §130b | 1400 | | | 2000 | | |
| 0815 | | | 0815 | | | 1415 | | | 2015 | | |
| 0830 | | | 0830 | | | 1430 | | | 2030 | | |
| 0845 | | | 0845 | | (b)(6) | 1445 | | | 2045 | | |
| 0900 | | | 0900 | | | 1500 | | | 2100 | | |
| 0915 | | | 0915 | | | 1515 | | | 2115 | | |
| 0930 | | | 0930 | | | 1530 | | | 2130 | | |
| 0945 | | | 0945 | | | 1545 | | | 2145 | | |
| 1000 | | | 1000 | | | 1600 | | | 2200 | | |
| 1015 | | | 1015 | | | 1615 | | | 2215 | | |
| 1030 | | | 1030 | | | 1630 | | | 2230 | | |
| 1045 | | | 1045 | | | 1645 | | | 2245 | | |
| 1100 | | | 1100 | | | 1700 | | | 2300 | | |
| 1115 | | | 1115 | | | 1715 | | | 2315 | | |
| 1130 | | | 1130 | | | 1730 | | | 2330 | | |
| 1145 | | | 1145 | | | 1745 | | | 2345 | | |
| Signature | Initials | Signature | Initials | Signature | Initials | Signature | Initials | Signature | Initials | Signature | Initials |
| | | (b)(3):10 USC §130b,(b)(6) | | | | | | | | | |

693

| MEDICAL RECORD | | | DOCTOR'S ORDERS (Sign all orders) | |
|--|------|----|---|--------------------|
| DATE AND TIME | | | DRUG ORDERS | DOCTOR'S SIGNATURE |
| START | STOP | RX | | NURSE'S SIGNATURE |
| RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING | | | | |
| 26 APR 06 0730 | | | 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. | |
| | | | Circulation checks every 15 mins for the first hour and then every hour. | |
| | | | Vital signs checks immediately after restraints and every 1 hour. | |
| | | | Offer restroom and fluids every 2 hours | |
| | | | Initiate Restraint Observation Checklist | |
| | | | (Orders to be signed by Licensed Independent (b)(3):10 USC §130b,(b)(6) IP) within 1 hour of restraints) | |
| | | | (b)(3):10 USC §130b,(b)(6) | |
| | | | GITMO | |
| | | | RESTRAINTS -- MEDICAL | |
| | | | 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. | |
| | | | 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 | |
| | | | (b)(3):10 USC §130b,(b)(6) | |
| | | | GITMO | |

(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

WAB pm

PROGRESS NOTES

(Sign all orders)

MEDICAL RECORD

DATE AND TIME

2/26/06

1695

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)

GITMO Nurse

(b)(3):10 USC §130b,(b)(6)

2/26/06

1695

PROCEDURE NOTE: INSERTION OF FEEDING TUBE

Indication: Malnutrition; hunger strike

Under local anesthesia (viscous lidocaine, 2%), a 10 F ~~12~~ 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.

GITMO Dr. / Nurse

(b)(3):10 USC §130b,(b)(6)

2/26/06

1695

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 1800. Detainee had / did not have physical injury from the restraint

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

GITMO Nurse

(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)

693

PROGRESS NOTES
Medical Record

STANDARD FORM 503 (REV. 7-91)
Prescribed by GSA/FPMR, FPMR (41CFR)

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 2/26/06

| | | | | | |
|------------------|-------------|-------------|------------------|-------------|-------------|
| Limb Restrained: | Time In: | Time Out: | Limb Restrained: | Time In: | Time Out: |
| Left arm | <u>1605</u> | <u>1805</u> | Left leg | <u>1605</u> | <u>1805</u> |
| Right arm | <u>1605</u> | <u>1805</u> | Right leg | <u>1605</u> | <u>1805</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)* |
| | | | Q. Other: See Notes (SF 509) |

*Minimal Time Requirements

| Time | Code | Initials | Time | Code | Initials | Time | Code | Initials | |
|------------------|------|-----------------|----------------------------|------|----------|------|------------------|----------|-----------------|
| 0600 | | | 0600 | | | 1200 | | | |
| 0615 | | | 0615 | | | 1215 | | | |
| 0630 | | | 0630 | | | 1230 | | | |
| 0645 | | | 0645 | | | 1245 | | | |
| 0700 | | | 0700 | | | 1300 | | | |
| 0715 | | | 0715 | | | 1315 | | | |
| 0730 | | | 0730 | | | 1330 | | | |
| 0745 | | | 0745 | | | 1345 | | | |
| 0800 | | | 0800 | | | 1400 | | | |
| 0815 | | | 0815 | | | 1415 | | | |
| 0830 | | | 0830 | | | 1430 | | | |
| 0845 | | | 0845 | | | 1445 | | | |
| 0900 | | | 0900 | | | 1500 | | | |
| 0915 | | | 0915 | | | 1515 | | | |
| 0930 | | | 0930 | | | 1530 | | | |
| 0945 | | | 0945 | | | 1545 | | | |
| 1000 | | | 1000 | | | 1600 | | | |
| 1015 | | | 1015 | | | 1615 | | | |
| 1030 | | | 1030 | | | 1630 | | | |
| 1045 | | | 1045 | | | 1645 | | | |
| 1100 | | | 1100 | | | 1700 | | | |
| 1115 | | | 1115 | | | 1715 | | | |
| 1130 | | | 1130 | | | 1730 | | | |
| 1145 | | | 1145 | | | 1745 | | | |
| Signature: _____ | | Initials: _____ | (b)(3):10 USC §130b,(b)(6) | | | | Signature: _____ | | Initials: _____ |

AdmSec:grm

693

DOCTOR'S ORDERS
(Sign all orders)

MEDICAL RECORD

DATE AND TIME

START STOP

RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

*2/10/06
0730*

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.

Circulation checks every 15 mins for the first hour and then every hour.

Vital signs checks immediately after restraints and every 1 hour.

Offer restroom and fluids every 2 hours

Initiate Restraint Observation Checklist

(Orders to be signed by Licensed Independent **(b)(3):10 USC** (LIP) within 1 hour of restraints)

(b)(3):10 USC §130b,(b)(6)

GITMO D

(b)(3):10 USC §130b,(b)(6)

INITIATION

MEDICAL

TE

Reason for **(b)(3):10 USC §130b,(b)(6)** ssity 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.

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

GITMO

(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

| MEDICAL RECORD | <p align="center">PROGRESS NOTES (Sign all orders)</p> |
|----------------|---|
| DATE AND TIME | |
| 2/24/06 | |
| 0925 | <p>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - - NURSING NOTE</p> |
| | <p>Detainee placed in (b)(1) Sec Reason for Restraint: <u>Medical Necessity</u></p> |
| | <p>Detainee was advised by the Medical Staff that hunger striking is detrimental to his health.</p> |
| | <p>His behavior is due to his refusal to eat and not due to mental status change or illness.</p> |
| | <p>Medical Staff/Guards attempted to get the detainee to eat on his own. He is being offered</p> |
| | <p>food at every meal, yet he refuses to eat. Because the</p> |
| | <p>detainee refuses to eat, restraints were initiated for medical necessity for feeding.</p> |
| | <p>Detainee will be observed continually and he will be reminded of how his behavior must</p> |
| | <p>change (he must eat voluntarily) to avoid the use of medical restraints for present</p> |
| | <p>and future feedings. Detainee was told that he will remain in medical</p> |
| | <p>restraints until feed and post feed observation (60-120 minutes).</p> |
| | <p align="right">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p> |
| | |
| | |
| | |
| | |
| 2/24/06 | <p>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</p> |
| 0925 | <p>Indication: Malnutrition; hunger strike</p> |
| | <p>Under local anesthesia (viscous lidocaine, 2%), a <u>10 F / 12 F</u> enteral feeding tube was</p> |
| | <p>inserted in the <u>R / L</u> nostril using standard procedure. A stylet was <u>not used</u>.</p> |
| | <p>Patient tolerated the procedure well. Placement in stomach was confirmed by</p> |
| | <p>insufflation and test dose of water. Successful procedure without complications.</p> |
| | <p align="right">GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6)</p> |
| | |
| | |
| 2/24/06 | <p>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</p> |
| 0925 | <p>Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding</p> |
| 1125 | <p>and was released from restraints and returned to his cell in good condition. Detainee was</p> |
| | <p>released from restraints at <u>1125</u>. Detainee had <u>not</u> have physical injury from the restraint</p> |
| | <p>episode. Detainee reported the following problems related to the restraint episode.</p> |
| | <p align="right">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p> |
| | <p align="center"><small>(continue on reverse side)</small></p> |

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

693

PROGRESS NOTES
Medical Record

STANDARD FORM 503 (REV. 7-91)
Prescribed by GSA/COMB, FPMR (41 CFR)

RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 2/24/06

| | | | | | |
|------------------|-------------|-------------|------------------|-------------|-------------|
| Limb Restrained: | Time In: | Time Out: | Limb Restrained: | Time In: | Time Out: |
| Left arm: | <u>0925</u> | <u>1125</u> | Left leg: | <u>0925</u> | <u>1125</u> |
| Right arm: | <u>0925</u> | <u>1125</u> | Right leg: | <u>0925</u> | <u>1125</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 |
|-----------|------------------------------|----------|------|--------------------|----------|-----------|----------|-----------|----------|-----------|----------|
| 0600 | | | 0600 | | | 1200 | | | 1800 | | |
| 0615 | | | 0615 | | | 1215 | | | 1815 | | |
| 0630 | | | 0630 | | | 1230 | | | 1830 | | |
| 0645 | | | 0645 | | | 1245 | | | 1845 | | |
| 0700 | | | 0700 | | | 1300 | | | 1900 | | |
| 0715 | | | 0715 | | | 1315 | | | 1915 | | |
| 0730 | | | 0730 | | | 1330 | | | 1930 | | |
| 0745 | | | 0745 | | | 1345 | | | 1945 | | |
| 0800 | | | 0800 | | | 1400 | | | 2000 | | |
| 0815 | | | 0815 | | | 1415 | | | 2015 | | |
| 0830 | | | 0830 | | | 1430 | | | 2030 | | |
| 0845 | | | 0845 | | | 1445 | | | 2045 | | |
| 0900 | | | 0900 | | | 1500 | | | 2100 | | |
| 0915 | | | 0915 | 11, 13, 15, 18, 20 | (b)(3): | 1515 | | | 2115 | | |
| 0930 | | | 0930 | 1, 12, 13 | 10 | 1530 | | | 2130 | | |
| 0945 | | | 0945 | 1, 12, 17 | USC | 1545 | | | 2145 | | |
| 1000 | | | 1000 | 1, 12, 13, 15, 18 | §130b | 1600 | | | 2200 | | |
| 1015 | | | 1015 | 1, 12, 13 | (b)(6) | 1615 | | | 2215 | | |
| 1030 | | | 1030 | 1, 12, 13 | | 1630 | | | 2230 | | |
| 1045 | | | 1045 | 1, 12, 13, 15, 18 | | 1645 | | | 2245 | | |
| 1100 | | | 1100 | 1, 12, 17 | | 1700 | | | 2300 | | |
| 1115 | | | 1115 | 1, 12, 13, 15, 18 | | 1715 | | | 2315 | | |
| 1130 | | | 1130 | 1, 12, 17 | | 1730 | | | 2330 | | |
| 1145 | | | 1145 | | | 1745 | | | 2345 | | |
| Signature | (b)(3): 10 USC §130b, (b)(6) | | | Signature | Initials | Signature | Initials | Signature | Initials | Signature | Initials |

693