

DOCTOR'S ORDERS
(Sign all orders)

MEDICAL RECORD

DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING					
18 Feb 06			Place Detainee in (b)(1)		
0730			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)		
			INITIATION OF 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 required.		
			(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

RESTRAINT OBSERVATION SHEET

Name: W. J. [unclear] Unit: 1028 Room: 1028 Date: 10/28/00
 Left arm: 1028 Right arm: 1028 Left leg: 1028 Right leg: 1028

- Observations (every 15 minutes):** Select the appropriate codes and initial each entry.
- | | | | |
|----------------------------|--------------------------|------------------------|----------------------------------|
| 1. Line of sight | 7. Faking | 13. Quiet | 19. Crawling |
| 2. Beating or hitting door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommittal |
| 3. Yelling or screaming | 9. Striding | 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. Learning 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 4 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. Staff interaction |
| D. Fluids refused | H. Medication refused | L. Physician Visit | P. VS (q 4 hr)* |
| Q. Other: See Notes (SF 509) | | | |

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		(b)(3):10	1430		
0845			0845		USC	1445		
0900			0900		§130b,(b)	1500		
0915			0915		(6)	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		

(b)(3):10 USC §130b,(b)(6)

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
7 Feb 06	0730		RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING		
			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 Practitioner (LIP) within 1 hour of restraints)		
			GITMO (b)(3):10 USC §130b,(b)(6)		
			INITIATION OF RESTRAINTS -- MEDICAL		
			Reason for Restraint: Medical Necessity for		
			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		
			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

643

MEDICAL RECORD		PROGRESS NOTES (Sign all entries)	
DATE AND TIME			
2/19/10		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)
2/19/10		PROCEDURE NOTE: INSERTION OF FEEDING TUBE	
		Indication: Mainutrition; 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	
2/19/10		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 1005. 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)

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

693 PM

PROGRESS NOTES
Medical Record

RESTRAINT OBSERVATION SHEET

Name: 7/1/86 Ward: 1015 Room: 1015 Date: 7/1/86
 Left arm: CS Right arm: CS Left leg: CS Right leg: CS

- Observation: (every 15 minutes) Select the appropriate codes and initial each entry.
- | | | | |
|----------------------------|--------------------------|--------------------------|-----------------------------------|
| 1. Face of light | 7. Talking | 13. Quiet | 19. Crawling |
| 2. Opening or locking door | 8. Mumbling incoherently | 14. Sleeping | 20. Noncommunicative |
| 3. Telling or hearing | 9. Standing | 15. Requesting attention | 21. Destructive behavior |
| 4. Cursing | 10. Walking or pacing | 16. Harmful to self | 22. Disobeying |
| 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 4 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. Postfall 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			1400			2000		
0815			0815			1415			2015		
0830			0830			1430			2030		
0845			0845			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	(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		
17 FEB 06 0858			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 GITMO (b)(3):10 USC §130b,(b)(6) (LIP) within 1 hour of restraints)		
			INITIATION OF 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		
			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

MEDICAL RECORD	<p style="text-align: center;">PROGRESS NOTES (Sign all orders)</p>
DATE AND TIME	
2/14/06	<p>INITIATION OF RESTRAINTS FOR MEDICAL NECESSITY - NURSING NOTE</p>
	<p>Detainee placed in (b)(1) Reason for Restraint: Medical Necessity</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 style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p>
2/17/06	<p>PROCEDURE NOTE: INSERTION OF FEEDING TUBE</p>
	<p>Indication: Malnutrition; hunger strike</p>
	<p>Under local anesthesia (viscous lidocaine, 2%), a 10 F / 12 F enteral feeding tube was</p>
	<p>inserted in the R / L nostril using standard procedure. A styliet was / was not used.</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 style="text-align: right;">GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6)</p>
2/17/06	<p>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING</p>
	<p>Reason for Restraint was for medical necessity for feeding. Detainee has received his feeding</p>
	<p>and was released from restraints and returned to his cell in good condition. Detainee was</p>
	<p>released from restraints at 1530. Detainee had / did not have physical injury from the restraint</p>
	<p>episode. Detainee reported the following problem: (b)(3):10 USC §130b,(b)(6)</p>
	<p style="text-align: right;">GITMO Nurse <small>(continue on reverse)</small></p>

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. 7-91)
Prescribed by GSA FPMR, 101-11.600

RESIDENT OBSERVATION SHEET

Resident Name: [Redacted]

Date: 11/1/05
 Unit: 1520
 Room: 1530
 Left Leg: 1530
 Right Leg: 1530

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

- 1. Line of sight
- 2. Beating or hitting door
- 3. Yelling or screaming
- 4. Cursing
- 5. Crying
- 6. Laughing
- 7. Talking
- 8. Mumbling incoherently
- 9. Staring
- 10. Walking or pacing
- 11. Lying down
- 12. Sitting
- 13. Quiet
- 14. Sleeping
- 15. Repeating phrases
- 16. Harmful to self
- 17. Threatening staff
- 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
- B. Meal refused
- C. Fluids offered (q 2 hr)*
- D. Fluids refused
- E. Toilet offered (q 2 hr)*
- F. Toilet refused
- G. Medication accepted
- H. Medication refused
- I. Circulation checks (q 1 hr)*
- J. ROM (q 2 hr)*
- K. RN observation (q 2 hr)*
- L. Physician Visit
- M. Bath/shower (qd)*
- N. Bath/shower refused
- O. Pt/staff interaction
- P. VS (q 4 hr)*
- 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			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		

(b)(3):10 USC §130b,(b)(6)

Signature: [Redacted] Initials: [Redacted] Signature: [Redacted] Initials: [Redacted]

(b)(3):10 USC §130b,(b)(6)

DOCTOR'S ORDERS

(Sign all orders)

MEDICAL RECORD

DATE AND TIME

RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

START STOP

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

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) within 1 hour of restraints)

(b)(3):10 USC §130b,(b)(6)

GITMO D

INITIALS

FS 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 required

(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

693

PROGRESS NOTES

(Sign all orders)

MEDICAL RECORD

DATE AND TIME

2/14/06

φ. E. V. φ

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)

2/14/06

φ. E. V. φ

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.

GITMO Dr. / Nurse (b)(3):10 USC §130b,(b)(6)

2/16/06

1010

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 1010. 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)

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

STANDARD FORM 509 (REV. 7-81)
Prescribed by GSA/IDMR, FPMR (41CFR)