

MEDICAL RECORD

DOCTOR'S ORDERS

(Sign all orders)

DATE AND TIME

START STOP RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

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)

GITMO D

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 (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

6:43 AM

MEDICAL RECORD
DATE AND TIME

PROGRESS NOTES
(Sign all orders)

1/2/15

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

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)

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 1:30. 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)

PROGRESS NOTES
Medical Record

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

Date: 1/27/06 Limb Restrained: L.R arm Time In: 1355 Time Out: 1555 Limb Restrained: Left leg Time In: 1355 Time Out: 1555
Right arm 1355 1555 Right leg 1355 1555

- 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)* |
| | | | 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			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					

Handwritten notes in table:
 1400-1430: 12/17/11/12
 1415-1445: 1/12/11/12
 1430-1445: 1/12/11/12
 1445-1500: 1/12/11/12
 1515-1530: 1/12/11/12
 1530-1545: 1/12/11/12
 1600-1645: 1/12/11/12

Signature _____ **Initials** _____ **Signature** _____ **Initials** _____

Address: _____

(b)(3):
 10 USC
 §130b
 (b)(6)

(b)(3):10 USC §130b,(b)(6)

693 PM

MEDICAL RECORD		DOCTOR'S ORDERS (Sign all orders)	
DATE AND TIME	RX	DRUG ORDERS	DOCTOR'S SIGNATURE / NURSE'S SIGNATURE
23 Jan 04	0715	RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING	
		Place Detainee in (b)(1) Sec	
		Reason For Restraint: Medical Necessity for Feeding	
		<input checked="" type="checkbox"/> 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 restraint)	
		(b)(3):10 USC §130b,(b)(6)	(b)(3):10 USC §130b,(b)(6)
23 Jan 04	0715	INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE	
		Reason for Restraint: Medical Necessity for Feeding	
		Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There is 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.	
			(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 AM

DOCTOR'S ORDERS
MEDICAL RECORD

MEDICAL RECORD
DATE AND TIME

PROGRESS NOTES
(Sign all orders)

1/23/85
C D 815

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

1/23/85
C D 815

Indication: Mainutrition; hunger strike

Under local anesthesia topical lidocaine, 2% **(b)(3):10 USC §130b,(b)(6)** 10 F 10 F 10 F 10 F enteral feeding tube was inserted in the OR **(b)(3):10 USC §130b,(b)(6)** 10 F 10 F 10 F 10 F stril using standard procedure. A 10 F 10 F 10 F 10 F **(b)(3):10 USC §130b,(b)(6)** 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

1/23/85
10/10

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 O/A. Detainee **(b)(3):10 USC §130b,(b)(6)** 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)

#693

PROGRESS NOTES
Medical Record

GO NDAFC NUMBER 100-1000
Revised by OASD/IC, OASD/IC-100

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

Date: 1/23/26 Limb Restrained: Time In: Time Out: Limb Restrained: Time In: Time Out:

Left arm: 0815 1810 Left leg: 0815 1810

Right arm: 0815 1810 Right leg: 0815 1810

- 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			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		
Signature		Initials	Signature		Initials	Signature		Initials	Signature		Initials
						(b)(3):10 USC §130b,(b)(6)					

16693

START STOP
 22 Nov 06
 0906

DOCTOR'S ORDERS

DOCTOR'S SIGNATURE REGISTER NO. WARD NO.

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 (LIP) within 1 hour of restraints)

GITMO Dr. USC §130b,(b)(6)

INITIATION OF RESTRAINTS -- MEDICAL OBSERVATION

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.

GITMO Dr. USC §130b,(b)(6)

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 R

693 pm

MEDICAL RECORD DATE AND TIME	PROVIDER'S SIGNATURE (Sign in letters)
1/22/04 1257	<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. 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).</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p>
1/22/04 1257	<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 inserted in the <u>R</u> / <u>L</u> nostril using standard procedure. A stylet was <u>was not used</u>.</p> <p>Patient tolerated the procedure well. Placement in stomach was confirmed by 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>
1/22/04 1257	<p>DISCONTINUATION OF RESTRAINTS NOTE AFTER FEEDING COMPLETE</p> <p>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 _____. Detainee had / did not have physical injury from the restraint episode. Detainee reported the following problems related to the restraint episode: _____</p> <p style="text-align: right;">GITMO Nurse (b)(3):10 USC §130b,(b)(6)</p>

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

PROCEEDINGS SECTION
 (Typed in letters)

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

Date: 1/22/06
 Left arm: 1857 Time In: 1857 Time Out: 1855
 Right arm: 1857 Time In: 1857 Time Out: 1855
 Left leg: 1857 Time In: 1857 Time Out: 1855
 Right leg: 1857 Time In: 1857 Time Out: 1855

- 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. Mutabing 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 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. 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	112 JK	(b)(3):1	1915		
0130			0730			1330	112 JK	0 USC	1930		
0145			0745			1345	112 JK	§130b,	1945		
0200			0800			1400	112 JK	(b)(6)	2000		
0215			0815			1415	112 JK		2015		
0230			0830			1430	112 JK		2030		
0245			0845			1445	112 JK		2045		
0300			0900			1500	112 JK		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)					

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME			DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP	RX			
24 Jan 45	12:45		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)		
			(b)(3):10 USC §130b,(b)(6)		
			INITIATION OF RESTRAINTS -- MEDICAL NECESSITY FOR FEEDING		
			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 PM