

MEDICAL RECORD			DOCTOR'S ORDERS (Sign all orders)		
DATE AND TIME		RX	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP				
30 Jan 06	0800		<b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b>		
			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.		
			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 Dr.		
30 Jan 06	0800		<b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b>		
			Reason for Restraint: Medical Necessity for Feeding		
			Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place him at greater risk during feeding using medical restraints.		
			Detainee will be observed continually while in medical restraints.		
			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.		

(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

for Feeding

DOCTOR'S ORDERS  
MEDICAL RECORD

PROGRESS NOTES

(Sign all orders)

MEDICAL RECORD

DATE AND TIME

1/30  
0848

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) (b)(3):10 USC §130b,(b)(6)

GITMO Nurse

PROCEDURE NOTE: INSERTION OF FEEDING TUBE

Indication: Malnutrition; hunger strike

Under local anesthesia (viscous lidocaine, 2%), a 10 F / 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 1048. Detainee had (did not) have physical injury from the restraint

episode. Detainee reported the following problems related

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)

PROGRESS NOTES  
Medical Record

FORM 100-107 (Rev. 1-77)  
Department of Defense

# RESTRAINT OBSERVATION SHEET

U.S. Naval Hospital Guantanamo Bay, Cuba

Date: 1/30      Limb Restrained:      Time In:      Time Out:      Limb Restrained:      Time In:      Time Out:

Left arm      0848      1048      Left leg      0848      1048

Right arm      0848      1048      Right leg      0848      1048

- Observations: (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             | B. 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)*              |
|                             |                             |                                 | Q. Other: See Notes (SF 509) |
- \*Minimal Time Requirements

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		

(b)(3)  
:10  
USC  
§130  
b,(b)(6)

Signature: \_\_\_\_\_ Initials: \_\_\_\_\_ Signature: \_\_\_\_\_ Initials: \_\_\_\_\_

(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				
3/06			<b>RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING</b> 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. 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>(b)(3):</b> er (LIP) within 1 hour of restraints) GITMO Dr. <b>10</b>		
3/06			<b>INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE</b> Reason for Restraint: Medical Necessity for Feeding Despite being advised that hunger striking is detrimental to his health, the detainee refuses to eat. Restraints were ordered for medical necessity to facilitate feeding the detainee. There is no evidence that medications or a medical process is causing this detainee's refusal to eat. Detainee does not have any medical condition/disability that would place him at greater risk during feeding using medical restraints. Detainee will be observed continually while in medical restraints. 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. <b>(b)(3):1</b> <b>0 USC</b> <b>§130b,(</b>		

(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

S. F. Jones  
ADM

MEDICAL RECORD

PROGRESS NOTES

(Sign all orders)

DATE AND TIME

1/31/06

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

§ 1306 (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 1022 Detainee had / did not have physical injury from the restraint

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

GITMO Nurse

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

PROGRESS NOTES  
Medical Record

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

NAVSUP FORM 1081-101 (Rev. 1-87)

Date: 1/31/06

Limb Restrained:  
 Left arm: 0825 Time In: 1022 Time Out:  
 Right arm: 0829 1022

Limb Restrained:  
 Left leg: 0825 Time In: 1022 Time Out:  
 Right leg: 0825 1022

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

*RELEASED*  
 (b)(3)  
 :10  
 USC  
 §130  
 b,(b)(6)

(b)(3):10 USC §130b,(b)(6)

693



MEDICAL RECORD

PROGRESS NOTES

(Sign all orders)

DATE AND TIME

2/5/06

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: 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 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 0730. 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; (ate; hospital or medical facility)

PROGRESS NOTES  
Medical Record

STANDARD FORM 500 (REV. 7-83)  
GPO: 1984 O - 584-101-7, PUBL. (4-78)



RESTRAINT OBSERVATION SHEET  
 (SF 509) (Rev. 10-1-99) (509) (30) (01)

2/5/06

Left Leg: 0755  
 Right Leg: 0755

Left Leg: 0950  
 Right Leg: 0950

Left Leg: 0755  
 Right Leg: 0755

Left Leg: 0755  
 Right Leg: 0755

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

- 1. Line of sight
- 2. Beating or kicking feet
- 3. Yelling or screaming
- 4. Cursing
- 5. Crying
- 6. Laughing
- 7. Talking
- 8. Mumbling incoherently
- 9. Standing
- 10. Walking or pacing
- 11. Lying down
- 12. Sitting
- 13. Quiet
- 14. Sleeping
- 15. Arguing with staff
- 16. Harmful to self
- 17. Threatening staff
- 18. Assaultive
- 19. Crawling
- 20. Nonconcurrent noise
- 21. Destructive Behavior
- 22. Disobeying
- 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 4 hr)\*
- J. ROM (q 2 hr)\*
- K. RN observation (q 2 hr)\*
- L. Physician Visit
- M. Bath/shower (qd)\*
- N. Bath/shower refused
- O. Pw/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
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		

(b)(3):  
 10  
 USC  
 §130b  
 (b)(6)

(b)(3):10 USC §130b,(b)(6)

693

DOCTOR'S ORDERS

(Sign all orders)

MEDICAL RECORD

DATE AND TIME

START

STOP

RX

DRUG ORDERS

DOCTOR'S SIGNATURE

NURSE'S SIGNATURE

03 FEB 06

RESTRAINT INITIATION ORDERS FOR MEDICAL NECESSITY FOR FEEDING

1400

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):ner (LIP) within 1 hour of restraints)

GITMO Dr 10

03 FEB 06

INITIATION OF RESTRAINTS -- MEDICAL OFFICER NOTE

1400

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.

(b)(3):1  
0 USC

(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

693