

## Kittitas County Prehospital EMS Protocols

### SUBJECT: BEHAVIORAL EMERGENCIES

- A. Utilize verbal de-escalation techniques;
  - 1. Begin by asking the patient to follow your orders.
  - 2. Advise them of the consequences of not following your orders.
  - 3. Finally, order them to do what you want them to do.
  
- B. Requirements for the use of force:
  - 1. You must have legitimate objectives:
    - a) For your safety.
    - b) For the safety of others.
    - c) For the patient's safety.
    - d) To facilitate treatment in a mentally incompetent patient.
  - 2. It must be immediately necessary, and law enforcement must be notified.
    - a) Request that law enforcement place patient in protective custody.
    - b) Document officer's name and agency if they refuse to place patient in protective custody.
  - 3. You must use the minimal amount of effective force initially.
  - 4. It must immediately cease once the objective has been met.
  - 5. Consider chemical restraints
    - a) IV or IM: **Haldol** 5 mg, may repeat in 30 minute
    - b) IV or IM: **Versed** 2.0-5.0 mg
    - c) IV/IM/IO: **Ketamine** – 5 mg/kg
  - 6. ***Consider ETI if necessary post sedation.***
  
- C. Do not use any of the following restraining techniques that could impair breathing.
  - 1. "Hog tying", where hands and feet are bound behind the patient.
  - 2. Sandwiching the patient between two backboards.
  - 3. Do not restrain patient in prone position during transport.

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- D. After a patient is under control, use humane techniques to restrain the patient.
- E. Once a patient is restrained, *do not* release them.
- F. If a patient is still in handcuffs, then a police officer must accompany the patient during transport or remove the handcuffs.
- G. The patient's condition must be closely and continuously monitored.
- H. Contact the receiving hospital when feasible.
- I. Document all facts regarding the objectives of the restraint.