

<p>Protocol: Physical Restraint</p>
<p>SCOPE: Poudre Valley Hospital EMS Division</p>
<p>PURPOSE:</p> <ol style="list-style-type: none"> 1. To define physical restraint in veterinary patients 2. Identify appropriate situations for its use
<p>DEFINITION</p> <ul style="list-style-type: none"> • Physical restraint in veterinary patients is defined any appropriate, effective and humane method used to safely immobilize a canine or feline for the purpose of medical intervention or acquisition of loose animal. Physical restraint is performed without the use of pharmaceutical intervention but can be used in conjunction with chemical restraint.
<p>GUIDELINES</p> <ol style="list-style-type: none"> A. First and foremost, the use of physical restraint is to <u>provide safety to the emergency medical services responder(s), veterinary staff, animal owner and any rescuers.</u> B. Proper restraint of veterinary patients will also <u>aid in reducing further injury of the animal and will facilitate rapid, efficient care in an ethical and humane fashion.</u> C. Painful or stressed animals may respond aggressively to any restraint or medical care from any person, including the owner/handler, regardless of the animal's "good nature" while at home or not working. D. Either the EMT or the animal's owner/handler can perform physical restraint for the patient. It is important to consider that an animal owner/handler may be distraught due to condition of their animal and as is such, may not be a reliable resource in the field. E. The situation and procedure to be performed will dictate the specific restraint style that is required. The decision as to which style is most effective will ultimately be deferred to the on-scene medical responders
<p>INDICATIONS</p> <p><u>Overall Indications</u></p> <ol style="list-style-type: none"> A. Proper muzzling and physical restraint MUST be performed for every patient during ALL patient contacts. <p><u>Indication for Sitting and Standing Restraint</u></p> <ol style="list-style-type: none"> A. Sitting and standing are appropriate for restraint during nearly any situation and are the most commonly used techniques. Specific indications for sitting and standing restraint are as follows: <ul style="list-style-type: none"> - Placement of a foreleg intravenous catheter <p><u>Indications for Recumbent Positions</u></p> <ol style="list-style-type: none"> A. Lateral <ul style="list-style-type: none"> - Placement of a hind limb intravenous catheter - Examination and treatment of trauma to the nails, footpads, digits, distal fore and hind limbs, thorax and abdomen B. Sternal <ul style="list-style-type: none"> - To gain airway access and facilitate respiration

- Emergency tracheostomy

CONTRAINDICATIONS

- A. Rabid animal
- B. Noted maxillofacial or palatal fractures
- C. Airway compromise

PROCEDURES

Note: For all restraint techniques, the restrainer must be cognizant of his/her strength and force while restraining the animal as well as any injuries the animal may have, such as limb fractures, abdominal distention, etc.

Technique: Muzzling

- A. Several methods and types of canine muzzling exist. The type of muzzle used will depend on the size of the patient, available material, type of trauma present and desired patient access

Muzzle Type	Required materials	Suggested Use
“Cage” or “Basket”	Manufactured cage/basket muzzle (preferably made out of plastic)	<ul style="list-style-type: none"> • All purpose • Preferred muzzle– allows for open mouth breathing • Suggested if oxygen delivery is indicated – can be turned into oxygen mask via plastic wrap
“Fabric”	Manufactured, pre-sized muzzle (small, medium, large, extra large)	<ul style="list-style-type: none"> • All purpose
“Quick Muzzle”	Any available, broad-width (preferred width: >1-2 inches) tape, leash, webbing, gauze, etc.	<ul style="list-style-type: none"> • Use only if a fabric or cage muzzle is unavailable • Can use a more narrow (<1 inch) piece of tape, gauze, etc. but note that this may cause cutaneous damage, bruising and/or bleeding on the snout of the patient

B. Application of the “Cage/Basket” and “Fabric” Muzzles:

- To apply these muzzles, the patient should be restrained either in the sitting or standing restraint positions (see below). Note that while the sitting or standing position is preferred, *any* restraint position can be used for the application of a muzzle
- Once restrained, the appropriately size muzzle is slid over the patient’s snout from the anterior aspect to the posterior aspect. Be sure that lower jaw is captured in the muzzle and is not free.
- Place the muzzle straps below the patient’s ears and secure the muzzle with the buckles/straps provided. The muzzle must be securely tightened with some room to allow for slight movement. Do not over tighten as this may cause discomfort to the patient and do not under tighten as this may allow the patient to escape the muzzle.

C. Application of the “Quick Muzzle”:

- To apply this type of muzzle, the patient should be restrained either in the sitting or standing restraint positions (see below). Note that while the sitting or standing position is preferred, *any* restraint position can be used for the application of a muzzle

- Once restrained, a length of tape, gauze, leash or webbing is draped under the animal's snout and wrapped twice around the snout.
- With the tails of the muzzle coming from under the snout, wrap each tail behind the animal's left and right ears towards the back of the head and tie a secure knot.
- Be sure to keep the material used for the muzzle flat against the animal's skin and do not over tighten the knot

Technique: Standing and Sitting Restraint

A. *Standing Position*

- The handler or other on-scene individual should take a kneeling posture and position the dog in a standing posture with its shoulder and side facing the restrainer's chest.
- The restrainer will then hook one arm around the ventral aspect of the dog's neck and the other arm should be then wrapped around the dog's thorax/abdomen, as far back as possible to keep the dog from sitting.
- The dog is then brought close to the restrainer's body and "hugged" with the dog's head pulled away from the individual performing an exam or treatment and pressed against the restrainer's shoulder. If need be, the restrainer may take the arm and hand around the dog's neck and place their hand behind their head. This provides additional head immobilization and prevents the dog from turning around to bite the restrainer or other personnel.
- If the dog is restless or will not cooperate with the restrainer, an additional person can be called to hold down the dog's legs

B. *Sitting Position #1*

- Place the dog in a sitting posture.
- The handler or other on-scene individual will position themselves in a kneeling position behind the dog
- The restrainer will then hook one arm around the ventral aspect of the dog's neck and the other arm should be then wrapped around the dog's thorax/abdomen, capturing the front limbs.
- The dog is then brought close to the restrainer's body and "hugged" with the dog's head pulled away from the individual performing an exam or treatment and pressed against the restrainer's shoulder
- If the dog is restless or will not cooperate with the restrainer, an additional person can hold down legs

C. *Sitting Position #2*

- Place the dog in a sitting posture.
- The handler or other on-scene individual will position themselves in a kneeling position behind the dog
- The restrainer will then place their fingers under the dog's snout and their thumbs on top of the snout.
- This allows the restrainer to extend the dog's neck with their hands and control/stabilize the dog's head and neck with their forearms

- If the dog is restless or will not cooperate with the restrainer, an additional person can hold down the front legs

Technique: Recumbency

C. Lateral #1

- The handler should have the dog get into a “down” position. If this is not possible, see *Lateral #2*.
- With the help of an additional person, the restrainer will kneel down and roll the animal to the animal’s left side or right side, depending on the position desired by the medical personnel or handler
- The restrainer will then snug their knees up behind the animal’s back and grab the dog’s ground-side fore and hind limbs at the level of the elbow and mid tibia/fibula respectively (i.e.: if the dog is laying on its left side, the restrainer will grab the dog’s left fore and hind limbs).
- The restrainer will then maintain their hold on the animal’s limbs and proceed to apply slight pressure with their forearms on the animal’s neck and abdomen. This enables the restrainer to securely restrain the dog and prevent it from standing up.
- For additional immobilization, the restrainer may opt to place a leg over the dog’s abdomen while keeping ahold of the dog’s limbs as described above

D. Lateral #2

- If the handler is unable to have the dog take a “down position”, the dog can be placed by the restrainer into a lateral recumbancy
- The restrainer will kneel down next to the standing dog and snug themselves up to the dog’s chest.
- With the help of an additional person to stabilize the animal’s head and body, the restrainer will reach ventrally and grab the dog’s legs that are closest to the restrainer’s body. For example, if the restrainer is on the dog’s left side, the restrainer will grab the dog’s left fore and hind limbs.
- The two individuals will then slowly and smoothly lean the dog against the kneeling restrainer and use the restrainer’s knees as a “ramp” to guide the dog down into a laterally recumbent position.
- The restrainer will then maintain their hold on the animal’s limbs and proceed to apply slight pressure with their forearms on the animal’s neck and abdomen. This enables the restrainer to securely restrain the dog and prevent it from standing up.
- For additional immobilization, the restrainer may opt to place a leg over the dog’s abdomen while keeping ahold of the dog’s limbs as described above

E. Sternal

- The handler should have the dog get into a down position
- The restrainer can then kneel next to the dog or straddle the dog
- If kneeling next to the animal, the restrainer can restrain the animal in a fashion nearly identical to the methods described in the “Standing Position” or “Sitting Position #1” methods

- If straddling the animal, the restrainer can restrain the animal in a fashion nearly identical to the method described in the "Sitting Position #2" method.

Physical Restraint	EMT	EMT-IV	EMT-P
All Procedures	SO	SO	SO