### PHYSICIAN INITIAL ASSESSMENT OF THE NEED FOR RESTRAINTS

**Reason procedure initiated:**
- [ ] Protect patient
- [ ] Protect others
- [ ] Medical emergency

**General medical status (include any conditions appearing to have arisen during the restraint):**

[Signature]

**Psychiatric status (include assessment of mental state):**

"Pt on her own, grooming herself. So I elected not to put her in a bed. First at 0706. There was little movement. Pt was still agitated and unable to be relaxed."

**Any additional de-escalation measures used or attempted as a less-restrictive intervention:**
- [ ] Attempted to interview in order to problem solve collaboratively
- [ ] Offered PRN medication(s)
- [ ] Offered choices/alternatives
- [ ] Other (describe):

**Assessment of risk of restraint:**
- [ ] Health complications
- [ ] Re-traumatization
- [ ] Compromising patient autonomy
- [ ] Compromised therapeutic relationship
- [ ] Other (describe):

**Rationale for continuation of restraint:**

"Restraint has been discontinued."

**Emergency condition no longer met, discontinue procedure:**

[Signature]

**Date:** 11/18/15

**Military Time:** 0730

**MD signature:**

**MD printed name:**

**Date:** 11/18/15

**Military Time:** 0730