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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Seclusion and Restraints

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|  |  |  |  |  |  |  |  | 5 |  |  |  |  |  |  |  |  |  | 6 |  |
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|  | 10 |  |  |  |  |  |  |  |  |  | 11 |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  | 16 |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Across**  **1.** No order for seclusion/restraint shall exceed 2 hours.  **4.** Ability to exit a room without being restricted.  **7.** Holding the patient with your hands.  **9.** Completed with staff immediately following incident.  **10.** Involuntary confinement of a patient in a room and they are prevented from leaving.  **11.** Arms are positioned in this manner while in restraints  **12.** This is updated after every incident.  **14.** Restraint or seclusion only used to ensure immediate physical \_\_\_\_\_\_ of patient, staff, or others.  **15.** Chemical Restraints  **16.** utilized as a last resort after less restrictive means have failed | **Down**  **2.** Restraints attached to the bed.  **3.** RN must document the patients \_\_\_\_\_ to the intervention.  **5.** Completed by RN within 1 hour of restraint/seclusion.  **6.** If the patient is in restraints and the door is \_\_\_\_\_\_ this is considered a restraint and seclusion.  **8.** No order for seclusion/restraint shall exceed 1 hour  **13.** No order for seclusion/restraint shall exceed 4 hours. |