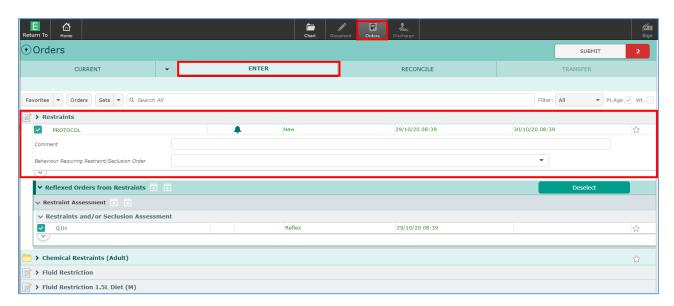
## **CARE4 MODULE NAME: PCS**

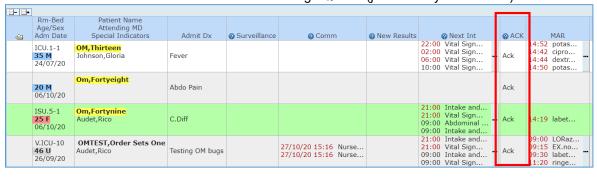
## Restraints

Restraints are a non-medication renewable order. The Renewable Orders functionality in MEDITECH is designed for orders that require regular assessment to determine if the order is still appropriate.

PROVIDER: Find, edit, and submit the order, just like any other order. You will notice there is also a nursing assessment that is reflexed automatically.



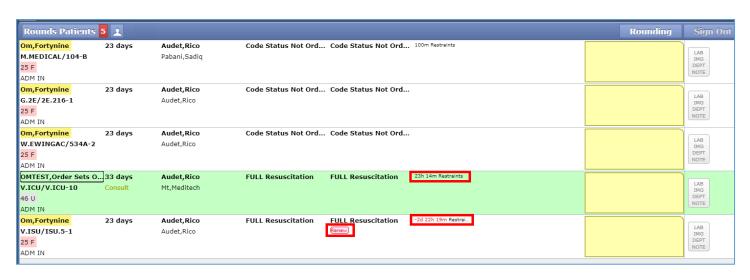
Renewable orders will flow to the nurse Acknowledge Queue (just like any other order)



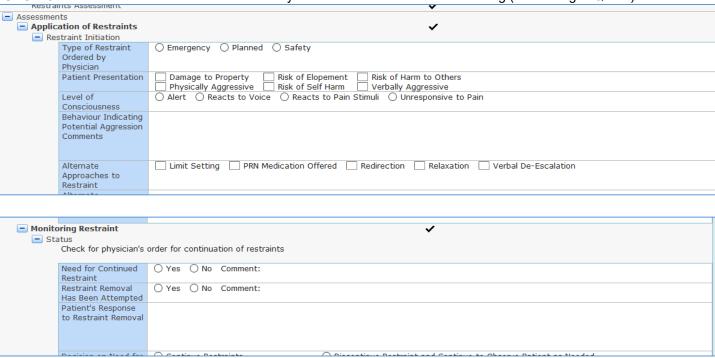


The first order is the restraint order that is renewable. The second order is the actual assessment that gets pushed on the nursing worklist.

Physician status boards display two types of indicators to communicate the time left until the order must be D/C'd or renewed. The first is a countdown indicating the time left before the renewal is due. Once the order is overdue, the time will go in 'negative' (displays how long it's overdue with a '-' sign) and appear in red.



NURSING: Document Restraints Assessment on your worklist Initiation and monitoring (monitoring is Q1HR).

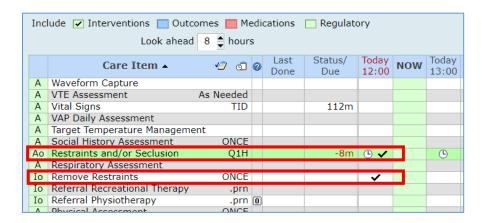


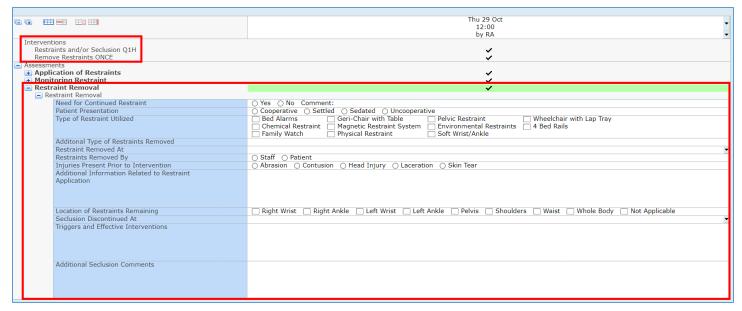
Restraint Removal: Once it is determined that the patient no longer needs restraints, place a new order to remove restraints. This is done using the Enter Orders routine. This order serves two purposes:

- 1. Any active restraint orders on the patient will be completed upon placing this order.
- The nursing Restraint removal intervention reflexes to communicate the need for restraint removal on the nurse's worklist as an "I did it" intervention.
- 3. The nurse would also get these orders to acknowledge



NURSING: On the Worklist, the Restraint removal intervention displays on the Worklist. This is an "I Did It" intervention with a "Once" frequency. The nurse selects both interventions to document (Document Restraint Removal in the assessment, and the "I Did It").





Once the nurse saves the documentation, the "I Did It" will prompt the nurse to complete the order, the nurse can then complete the Restraint/Seclusion Assessment.



