

Basic Approach to Dental Treatment under Physical Restraint

(based on the "Approach to Physical Restraints" premise provided the Ministry of Health, Labor and Welfare)

Physical restraints employed in general medical and nursing care settings are based on recommendations by the Ministry of Health, Labor and Welfare (MHLW), and have long been used as an unavoidable technique in medical and nursing care settings from the perspective of ensuring safety. In principle, physical restraint is considered to be an act of abuse, though does not fall under the category of "urgent and unavoidable cases"*, as defined in the "Physical Restraint Guidance" (edited by the Ministry of Health, Labor and Welfare's Operation Zero Physical Restraint Promotion Council), thus is used in such instances where the life or body of the patient is in danger. Therefore, the Society has established the following criteria for patients who are subject to use of physical restraint.

- (1) Patients for whom physical restraint is deemed necessary to ensure the safety of dental treatment due to their young age or some other disability.
- (2) The necessity of physical restraint must be recognized by more than one person, such as a dentist and a dental hygienist.
- (3) The method and duration of restraint must be explained to the patient or guardian in an easy-to-understand manner, and their consent must be obtained.
- (4) A person other than the primary physician must be present during the restraint to monitor safety.

Patients who meet these requirements are eligible for treatment under physical restraint.

Physical restraint includes use of a Restrainer[®], towels, and restraint belts, as well as manual restraint by the primary physician or assistant.

Procedures for performing dental treatment under physical restraint

- (1) The physician in charge of the procedure and at least one other dentist or dental hygienist must first approve the need to use a restraint device (Restrainer[®], towels, etc.).
- (2) For treatment performed under mild manual restraint, verbal parental consent for restraint is obtained.
- (3) When treatment is performed under restraint with a restraint device, consent by the patient or

guardian must be obtained, and a consent form signed. When obtaining the consent, the treatment provider must be sure to explain the method, duration, and preoperative and postoperative measures of restraint.

- (4) When using a restraint device, not only the surgeon but also an assistant dentist or dental hygienist must assist the patient, and a biological monitor for heart rate and blood oxygen saturation (SpO₂) must be worn by the patient to ensure their safety.
- (5) After dental treatment under physical restraint, the preoperative, intraoperative, and postoperative conditions must be documented in the medical records of the patient.

Note: *Three requirements that fall under the category of “urgent and unavoidable cases”, as defined by the Ministry of Health, Labor and Welfare.

- (1) Imminence: When there is a significant likelihood that the life or body of the patient or others will be endangered.
- (2) Non-substitutability: There is no alternative to physical restraint.
- (3) Temporality: Physical restraint must be temporary.