

Body mechanics

All staff are expected to use proper body mechanics at all times. Aids to lifting include gait belts, transfer boards and an electric Invacare lift.

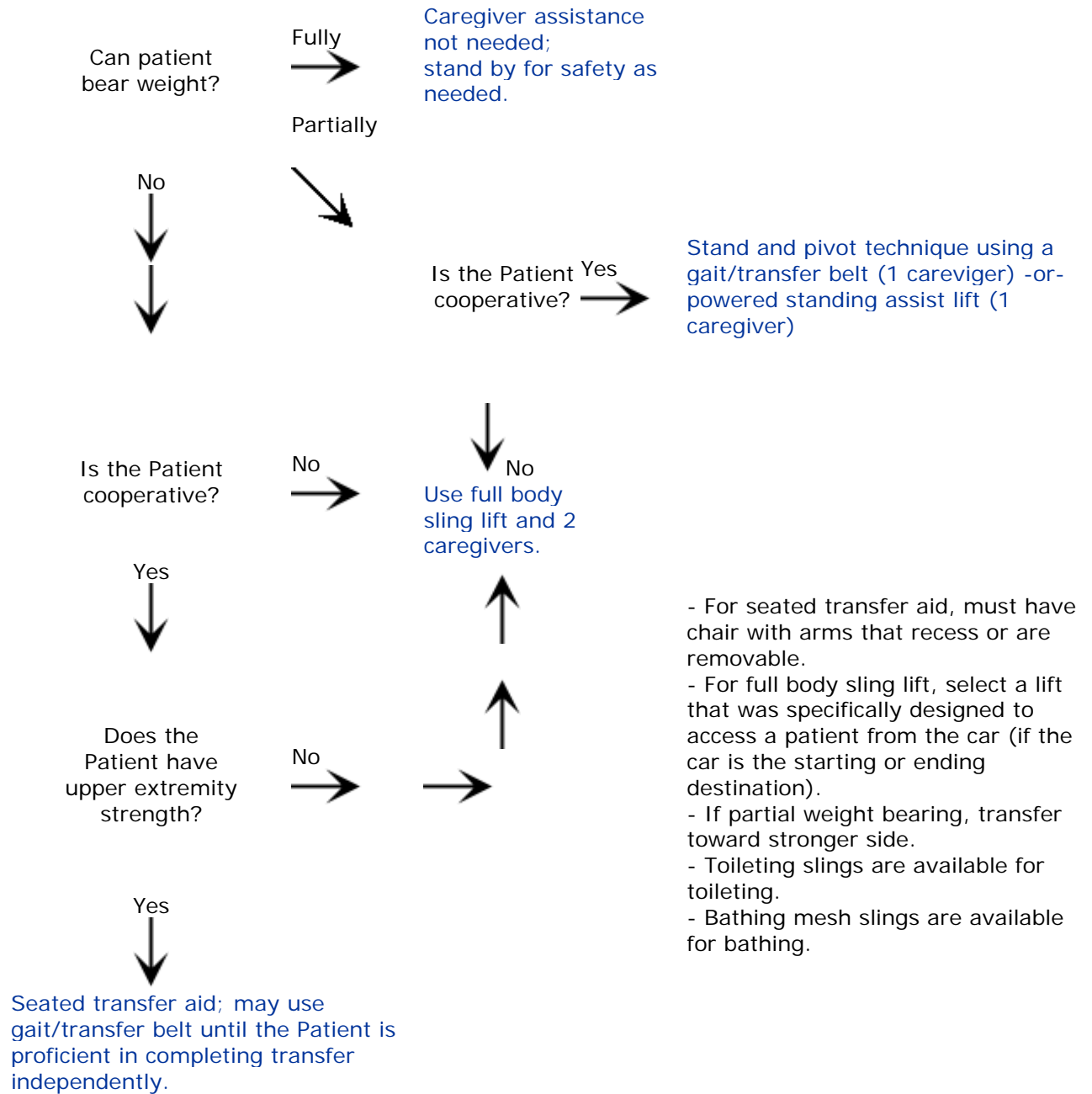
Preventing Slips, Trips, Falls and Other Injuries:

In order to prevent slips, trips and falls from happening, all staff need to do the following:

- Wear appropriate rubber soled footwear
- Wipe up spills as soon as they occur
- Correct hazards (electric cords, oxygen tubing, etc) as soon as they occur. If a hazard is not correctable (such as a worn carpet or loose floor tile), notify maintenance immediately to prevent others from injury.
- Use proper equipment when lifting, transferring, or ambulating patients
- Ask for help when attempting to lift a patient or object that is heavy.
- Avoid running and horseplay
- Use caution outdoors on uneven surfaces.
- Notify maintenance immediately if ice is noted on sidewalks and parking surfaces.
- In the event you are injured, report the injury immediately to your supervisor or instructor. Report to the emergency room for treatment. Please be aware you will need to provide information regarding your agency or school to the emergency room, as students and registry staff are not covered under SHRMC's workman's compensation program

Identifying Problems and Implementing Solutions for Resident Lifting and Repositioning

FIGURE 1. Transfer to and from: Bed to Chair, Chair to Toilet, Chair to Chair, or Car to Chair.



- For seated transfer aid, must have chair with arms that recess or are removable.
- For full body sling lift, select a lift that was specifically designed to access a patient from the car (if the car is the starting or ending destination).
- If partial weight bearing, transfer toward stronger side.
- Toileting slings are available for toileting.
- Bathing mesh slings are available for bathing.

FIGURE 2. Lateral Transfer to and from: Bed to Stretcher, Trolley

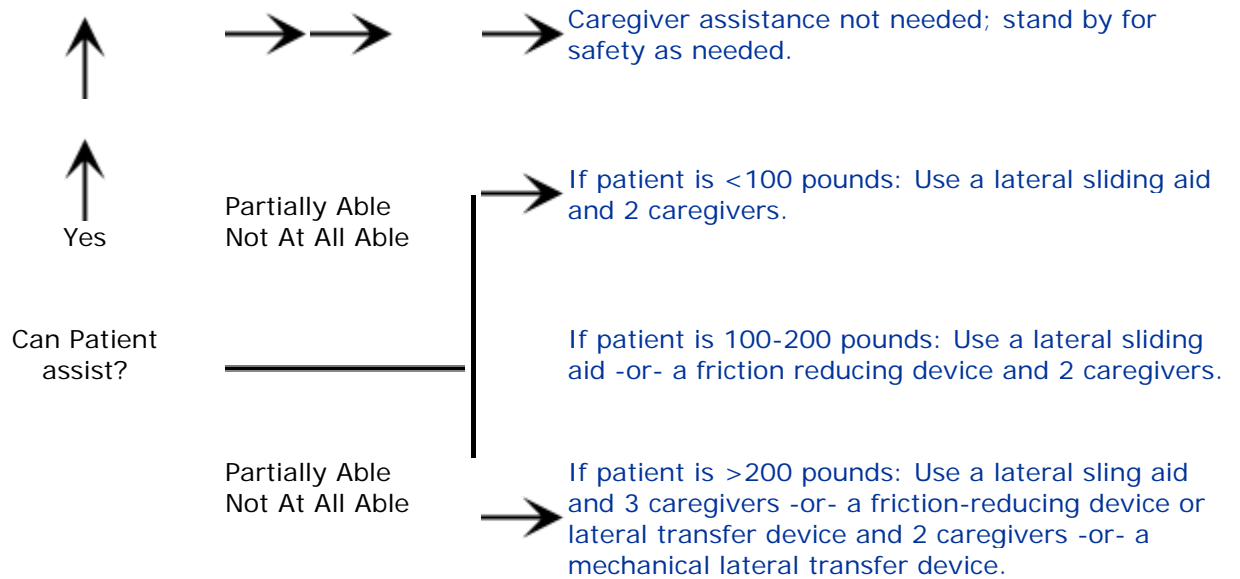
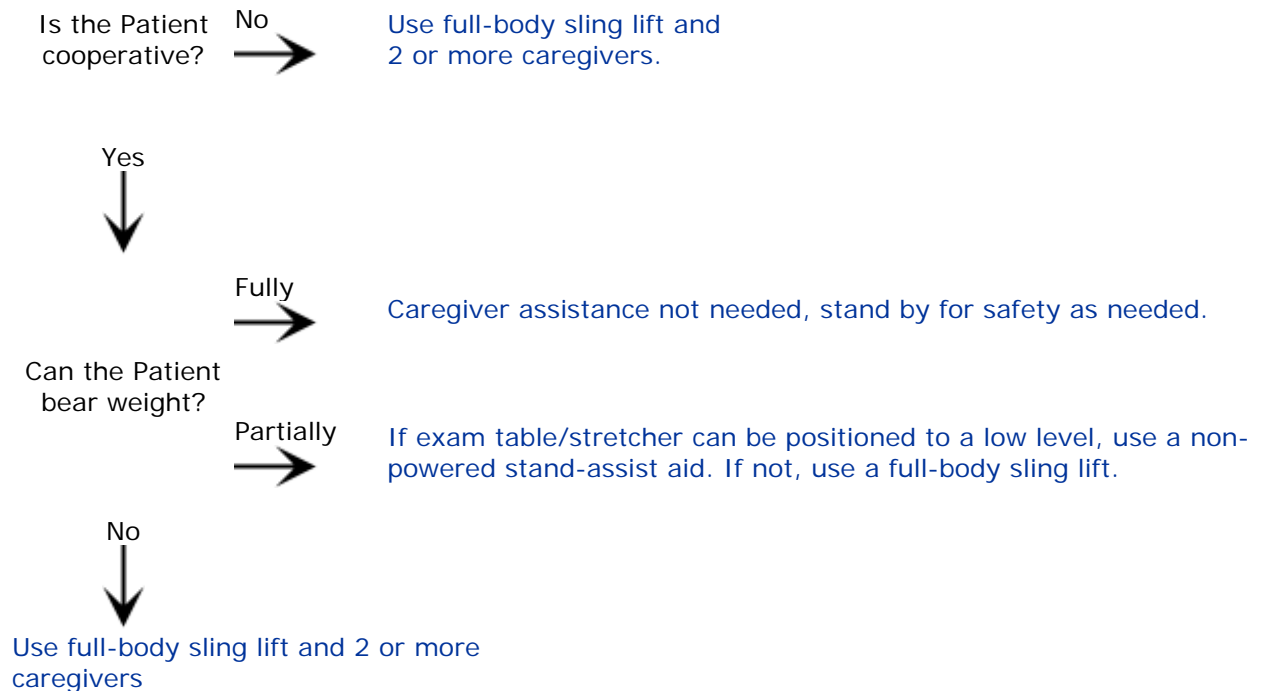


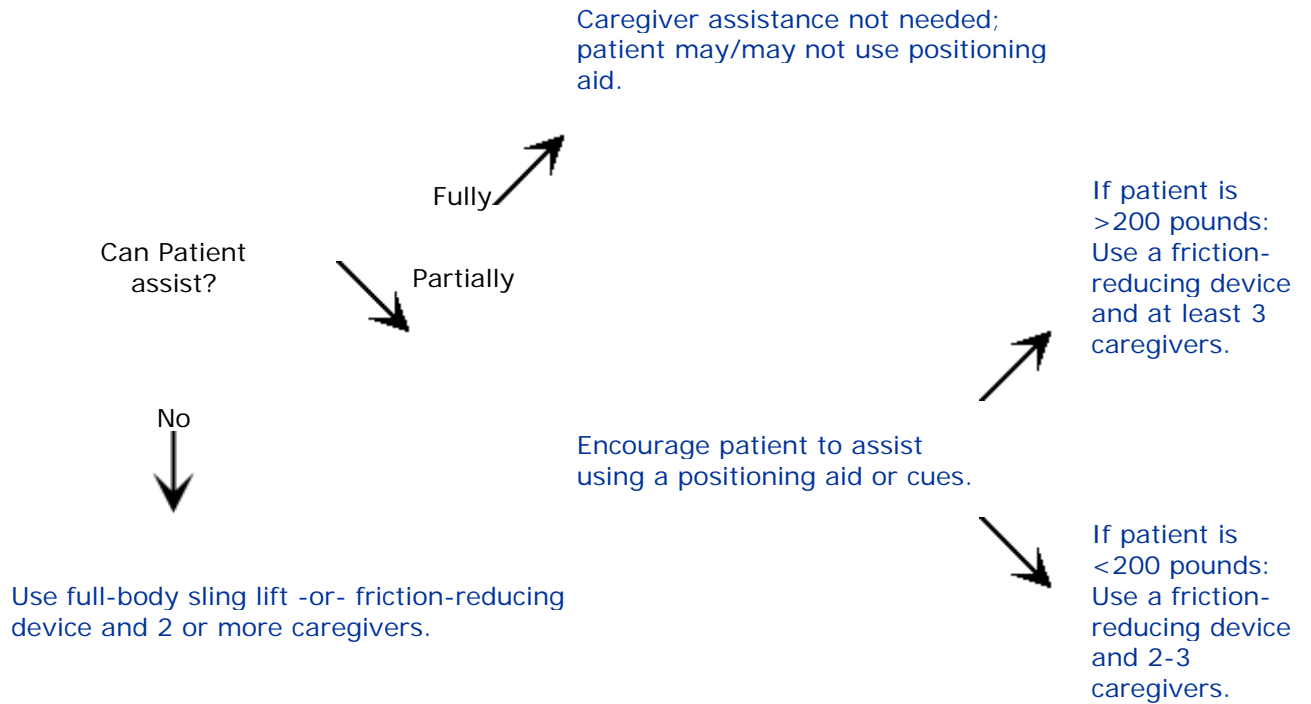
FIGURE 3. Transfer to and from: Chair to Stretcher



Comments:

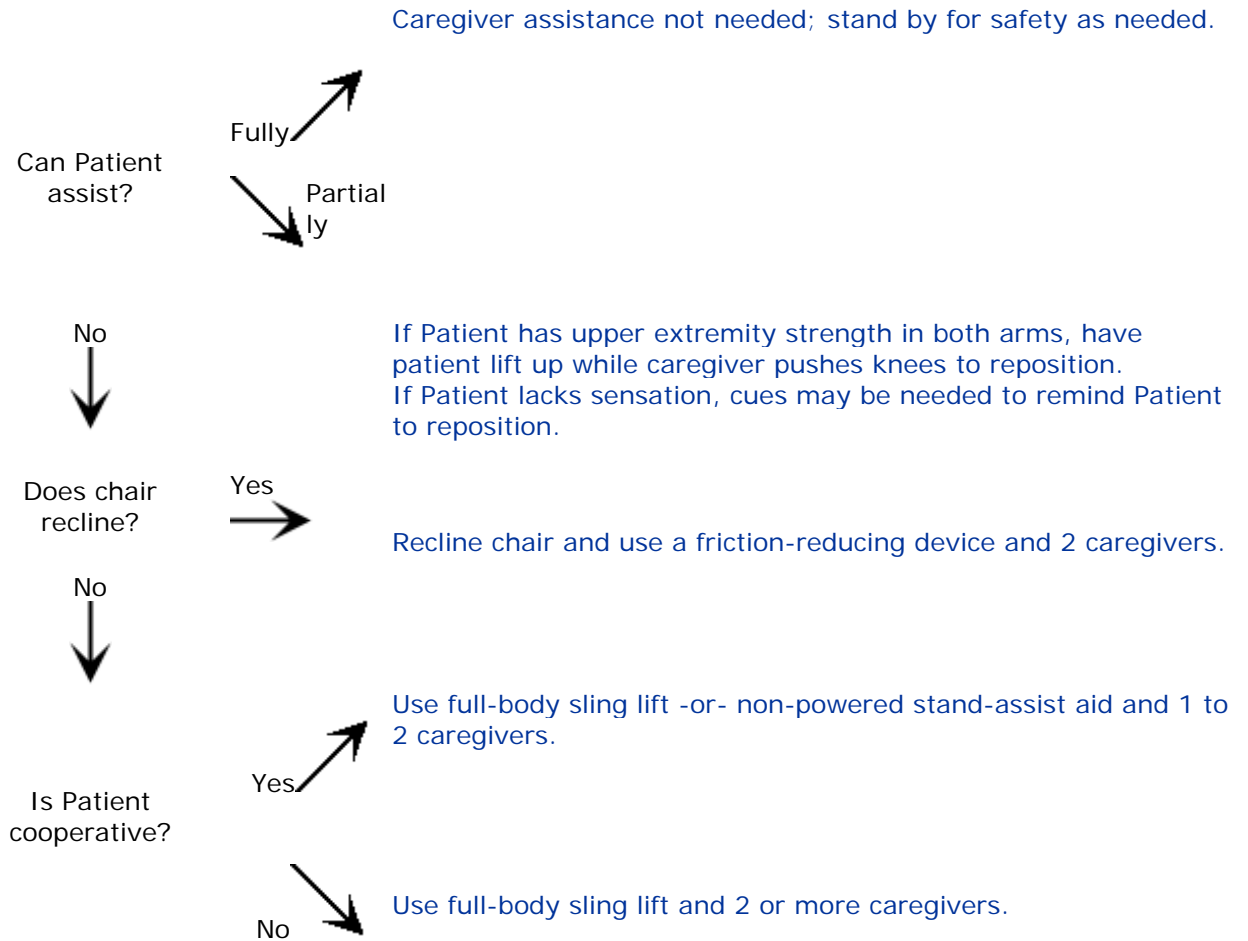
- High/low exam tables and stretchers would be ideal.

FIGURE 4. Reposition in Bed: Side-to-Side, Up in Bed



- This is not a one person task - DO NOT PULL FROM HEAD OF BED.
- When pulling a patient up in bed, the bed should be flat or Trendelenburg position to aid in gravity, with the side rail down.
- For patient with Stage III or IV pressure ulcers, care should be taken to avoid shearing force.
- The height of the bed should be appropriate for staff safety (at the elbows).
- If the patient can assist when repositioning "up in bed", ask the patient to flex the knees and push on the count of three.

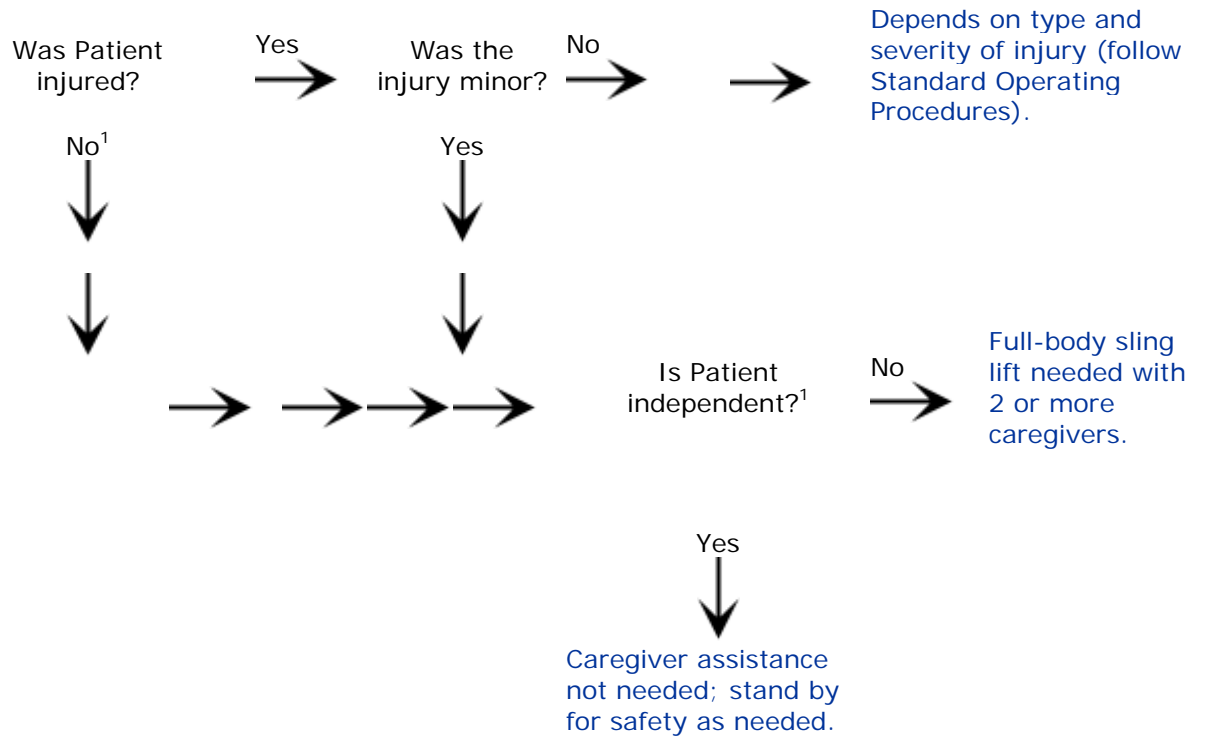
FIGURE 5. Reposition in Chair: Wheelchair and Dependency Chair



Comments:

- This is not a one person task: DO NOT PULL FROM BEHIND CHAIR.
- Take full advantage of chair functions, e.g., chair that reclines, or use of arm rest of chair to facilitate repositioning.
- Make sure the chair wheels are locked.

FIGURE 6. Transfer a Patient Up From The Floor



Comments:

- Use full-body sling that goes all the way down to the floor (most of the newer models are capable of this).
- ¹Modifications made with concurrence of Dr. Audrey Nelson at Veterans Administration Hospital, Tampa, Florida.