

Guidelines For Transferring

From the Floor

When it is medically appropriate, use a mechanical assist device to lift people from the floor. If assist devices are not readily available or appropriate you may have to perform a manual lift.

When placing slings, blankets, draw sheets or cots under the person:

- Position at least two people on each side of the person. Get additional help for large patients or residents
- Bend at your knees, not your back. Do not twist.
- Roll the person onto their side without reaching across them
- If using hoists, lower the hoist enough to attach slings without strain

If manually lifting, kneel on one knee, grasp the blanket, draw sheet or cot. Count down and synchronize the lift. Perform a smooth lift with your legs as you stand up. Do not bend your back.

GUIDELINES

FOR ASSISTING IN SURGERY



- Use retractor rings instead of prolonged manual holding of retractors
- Position operating tables or other surfaces at waist height
- Stand on lifts or stools to reduce reaching
- Frequently shift position or stretch during long operations
- Stand with one foot on a lift and frequently alternate feet to reduce pressure on the back
- Reduce the number of instrument sets (trays) on a case cart
- Store instrument sets (trays) in racks between the waist and shoulders
- Use stands or fixtures to hold extremities
- Get help from coworkers as needed to:
 - Position legs or extremities in stirrups
 - Move heavy carts, microphones, monitors, alternate operating tables, equipment or fixtures.



General Guidelines for Lifting and Moving Patient or Residents



- ✚ **Assess the patient or resident BEFORE lifting or moving them**
- ✚ **Eliminate or reduce manual lifting and moving of patients or residents whenever possible.** Use assistive devices or equipment when available and appropriate for the activity.
- ✚ **Get patients or residents to help as much as possible** by giving them clear simple instructions with adequate time for response.
- ✚ **Know your own limits and do not exceed them**
- ✚ **Get help whenever possible**
 - Use teamwork. Try to choose members who:
 - Are adequately trained, and have a similar understanding of proper techniques and timing
- ✚ **Mentally plan and prepare** (consider routes of travel and obstructions, clear out paths)
- ✚ **Use (or modify) chairs, beds or other surfaces to keep work tasks, equipment and supplies close and the correct height** (between the waist and shoulders)
- ✚ **Make sure brakes hold properly and apply them firmly on beds, gurneys, chairs etc.**
- ✚ **Use upright, neutral working postures and body mechanics**
 - Bend your legs, not your back. Use your legs to do the work
 - When lifting or moving the patient or resident always face them
 - Do not twist when turning. Pick up your feet and pivot your whole body in the direction of the move.



GUIDELINES FOR AMBULATING REPOSITIONING AND MANIPULATING

These tasks are usually performed in or around beds, gurneys, chairs, toilets, showers and bathtubs.

Equipment commonly used includes gait or transfer belts with handles (for better grip and stability), pivot discs, draw sheets and incontinence pads.

Using Gait or Transfer Belts With Handles

- ❖ Keep the individual as close as possible
- ❖ Avoid bending, reaching or twisting your back when
 - Attaching or removing belts (raise or lower bed, bend at the knees)
 - Lowering the individual down
 - Assisting with ambulation
- ❖ Pivot with your feet to turn
- ❖ Use a gentle rocking motion to take advantage of momentum

Performing Stand-Pivot Type Transfers – Used for transferring bed to chair, etc, or to help and individual get up from a sitting position.

- ❖ Use transfer discs or other assists when available. If using a gait belt or transfer belt with handles follow the above guidelines.
- ❖ Keep feet at least shoulder width apart
- ❖ If the patient or resident is on a bed, lower the bed so that they can place their feet on the floor to stand
- ❖ Place the receiving surface (e.g. wheelchair) on the individuals strong side (for stroke or hemiparalysis conditions) so they can help in the transfer
- ❖ Get the person closer to the edge of the bed or chair and ask them to lean forward as they stand (if medically appropriate)
- ❖ Block the individual's weak leg with your leg or foot
- ❖ Bend your legs, not your back
- ❖ Pivot with your feet to turn
- ❖ Use a gentle rocking motion to take advantage of momentum

Lifting or Moving Tasks with the Patient or Resident in Bed – Some common methods include scooting up or repositioning individuals using draw sheets and incontinence pads in combination with a log roll or other techniques.

- ❖ Adjust beds, gurneys, or other surfaces to waist height and as close to you as possible
- ❖ Lower the rails on the bed, gurney, etc., and work on the side where the individual is closest
- ❖ Place equipment or items close to you and at waist height
- ❖ Get help and use teamwork

PROPER WORK PRACTICES

In general, eliminate lifting and moving patients manually when possible by using equipment and devices. Get help from other staff. Tell the patient or resident what they can do to help. Give them clear simple instructions with adequate time for response.

Guidelines For Manual Lifting and Lateral Transfers

Lifting

- ❖ Use upright, neutral working postures and proper body mechanics
 - Bend your legs, not your back. Use your legs to do the work.
 - When lifting or moving people always face them
 - Do not twist when turning. Pick up your feet and pivot your whole body in the direction of the move
- ❖ Try to keep the person you are moving, equipment and supplies close to the body. Keep handholds between your waist and shoulders
- ❖ Move the person towards you, not away from you
- ❖ Use slides and lateral transfers instead of manual lifting
- ❖ Use a wide, balanced stance with one foot slightly ahead of the other
- ❖ Lower the person slowly by bending your legs, not your back. Return to an erect position as soon as possible
- ❖ Use smooth movements and do not jerk. When lifting others, coordinate lifts by counting down and synchronizing the lift

Lateral Transfers

- ❖ Position surfaces (e.g. bed, and gurney etc.) as close as possible to each other. Surfaces should be at approximately waist height , with the receiving surface slightly lower to take advantage of gravity
- ❖ Lower the bed rails on both surfaces (e.g. bed, and gurney etc.)
- ❖ Use draw sheets or incontinence pads in combination with friction reducing devices (slide boards, slippery sheets, plastic bags, low friction mattress covers etc.)
- ❖ Get a good hand hold by rolling up the draw sheets and incontinence pads or use other assist equipment such as slippery sheets with handles
- ❖ Kneel on the bed or gurney to avoid extended reaches and bending of the back
- ❖ Have team members on both sides of the bed or other surfaces. Count down and synchronize the lift. Use a smooth coordinated push pull motion. Do not reach across the person you are moving.