Lifting and Moving Patients
OBJECTIVES

3.1 Define key terms introduced in this chapter. Slides 9–11, 14, 16–17, 27, 31, 33, 42–45, 50

3.2 Describe the factors that you must consider before lifting any patient. Slides 11–14

3.3 Use principles of proper body mechanics when lifting and moving patients and other heavy objects. Slides 12–14, 17

continued
OBJECTIVES

3.4 Demonstrate the power lift and power grip when lifting a patient-carrying device. Slide 14

3.5 Follow principles of good body mechanics when reaching, pushing, and pulling. Slides 15–17

3.6 Give examples of situations that require emergency, urgent, and non-urgent patient moves. Slides 19, 26, 29

continued
OBJECTIVES

3.7 Demonstrate emergency, urgent, and non-urgent moves. Slides 20–25, 27–29

3.8 Given several scenarios, select the best patient lifting and moving devices for each situation. Slides 31–40

3.9 Demonstrate proper use of patient lifting and carrying devices. Slides 31–40

continued
3.10 Differentiate between devices to be used to lift and carry patients with and without suspected spinal injuries. Slides 41–45

3.11 Identify with the feelings of a patient EMS personnel are lifting or carrying. Slides 41, 46–48
- Slide 17  Body Mechanics During Moving and Transferring Video
- Slide 50  Prehospital Lifting of Patients Video
• How using body mechanics to lift and move patients can help prevent injury
• When it is proper to move a patient, and how to do so safely
• The various devices used to immobilize, move, and carry patients
Topics

• Protecting Yourself: Body Mechanics
• Protecting Your Patient: Emergency, Urgent, and Non-Urgent Moves
Protecting Yourself: Body Mechanics
Protecting Yourself: Body Mechanics
Before Beginning the Lift

- Estimate weight
- Know own limitations
- Plan and communicate with partner
Rules for Lifting

- Position feet properly
- Use legs
- Never turn or twist
- Do not compensate when lifting with one hand

continued
Rules for Lifting

• Keep weight as close to your body as possible
• Whenever possible, use stair chair when carrying patient on stairs
Power Lift and Power Grip
Reaching

• Keep back in locked-in position
• Avoid twisting while reaching
• Avoid reaching more than 15–20 inches in front of body
• Avoid prolonged reaching when strenuous effort is required
Pushing or Pulling

- Push, don’t pull
- Back locked in
- Line of pull through center of body
- Weight close to body
- When weight is below waist, use kneeling position
- Avoid pushing or pulling overhead
- Elbows bent, arms close to sides
Body Mechanics During Moving and Transferring Video

Click [here](#) to view a video on the subject of body mechanics during moving and transferring patients.
Protecting Your Patient: Emergency, Urgent, and Non-Urgent Moves
Emergency Move Situations

- Hazardous scene
- Repositioning required to care for life-threatening conditions
- Must reach other patients
Emergency Move: Clothes Drag
Emergency Move: Head First Drag
Emergency Move: Firefighter’s Drag
Emergency Move: Firefighter’s Carry
Emergency Move: One-Rescuer Assist
Emergency Move:
Two-Rescuer Assist
Urgent Moves

• Required treatment can be performed only if patient is moved
• Patient’s condition deteriorating
• Performed with precautions for spinal injury
Urgent Move: Onto Long Spine Board

- Used if immediate threat to life and suspicion of spine injury
- Patient supine, log-roll onto side
- Place spine board next to body; log-roll onto board
- Lift onto stretcher
- Secure to stretcher; load into ambulance
Urgent Move: Rapid Extrication
Non-Urgent Move

- Patient stable
- No immediate life threat
- Patient can be assessed, treated, and moved in normal way
- Take all required precautions not to aggravate existing conditions
Patient-Carrying Devices
Wheeled Ambulance Stretcher
Power Stretcher
Bariatric Stretcher
Stair Chair
Short Spine Board
Vest-Type Extrication Device
Scoop Stretcher
Basket Stretcher
Flexible Stretcher
Vacuum Mattress
Think About It

- How do you choose the appropriate patient-carrying device?
Moving Patients
With Suspected Spinal Injury

• Immobilize head, neck, and spine before move
Moving Patients Without Suspected Spinal Injury

- Extremity lift
- Used to carry patient to stretcher or stair chair
- Can be used to lift patient from ground or from sitting position

continued
Moving Patients Without Suspected Spinal Injury

- Direct ground lift
- Lifting from ground to stretcher
Moving Patients Without Suspected Spinal Injury

• Draw sheet method (shown)
• Direct carry method
Recovery Position
Position of Comfort
Positioning for Shock

- Place patients believed to be in shock in supine position
- Do not lower head
- Do not elevate legs
Transferring the Patient to a Hospital Stretcher
Prehospital Lifting of Patients Video

Click here to view a video on the subject of prehospital lifting of patients.
Lifting and moving patients requires planning, proper equipment, and careful attention to body mechanics to prevent injury to patient and yourself.

Emergency moves may aggravate spine injuries and, therefore, are reserved for life-threatening situations.
Chapter Review

- Urgent moves are used when the patient must be moved quickly but there is time to provide quick, temporary spinal stabilization.
- Non-urgent moves are normal ways of moving a patient to a stretcher after performing a complete on-scene assessment.
Remember

- Proper lifting technique is important wellness strategy.
- Biomechanics and rules of lifting help prevent injuries associated with lifting.
- Many different patient-carrying devices exist. Choose the correct device based upon particular patient and needs of particular movement.
Remember

- Use proper technique to move patients onto patient-carrying devices and position them for transport based upon their condition.
Questions to Consider

• Why are body mechanics so important when lifting and moving patients?
• Why is using the appropriate patient-carrying device an important consideration?
• When would an emergency move be necessary?
• In what ways can proper positioning help a patient’s condition?
Critical Thinking

- You arrive at a vehicle crash and find an elderly driver slumped over the wheel. Upon examination you determine the patient is in respiratory arrest, but not trapped in the vehicle. Which move would be appropriate for this patient?
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