

Tips for Reducing Patient Handling Injuries

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1. **Reduce the force of repositioning patients** by using an overhead hoist if available or by always using two caregivers to complete the task, utilizing the trendelenburg function of the bed, placing friction reducing materials under the patient, and/or activating the maximum inflation setting when available on air surfaces. Trapeze assist bars allow many patients with upper body strength to provide assistance in their own repositioning.
2. **Improve the caregiver's posture during repositioning** by always using two people to complete the task, adjusting the bed height to near the caregivers' waist level, and moving with the legs rather than swinging the arms.
3. **Reduce the frequency of repositioning patients** by placing their hips at the point of mattress bending during changes in bed position rather than moving the head of the person to the head of the bed.
4. **Reduce the force required to assist the patient on and off a toilet** by installing toilets that are slightly higher than standard, positioning the bathroom rails to optimize the patient's ability to assist, and by installing wider doorways that promote the use of lifting equipment within the bathroom.
5. **Improve the caregiver's posture during patient ambulation** by using gait belts with handles.
6. **Reduce the force to stand patients** from the bed by using the powered height adjustment to stand a patient that has been perched at the edge of the bed.
7. **Reduce the frequency of chair transfers** with non-weight bearing patients by using a bed that converts to a chair position in order to attain cardio-pulmonary benefits of an upright position.
8. **Reduce the force of chair transfers.** For non-weight bearing patients use either a powered lift device or perform a lateral transfer to a stretcher chair. For patients with minimal weight bearing capacity minimize the travel distance, using a small pivot angle, and using stand assist lifts for patients who have fatigued too much to assist with returning to the bed.
9. **Reduce the force required for lateral transfers** by using friction reducing materials under the patient or by using a powered lift device between the surfaces.
10. **Reduce the frequency of lateral transfers** by using wound prevention surfaces on all beds in order to reduce transfers to specialty surfaces, having radioluscent surfaces that allow more bedside procedures and transporting patients in powered beds instead of stretchers.