

APPENDIX
Patient Movement

INTRODUCTION:

When moving patients, keep in mind that they will be frightened when moved or carried. Your focus should be on safe and smooth transfer to the transport device. Always insure that enough personnel are assisting to provide a safe transfer. Use proper body mechanics whenever lifting, and as much as possible, given the circumstances.

PROCEDURE:

- A. Complete an adequate assessment prior to patient movement.
- B. Monitor airway and cervical spine carefully while moving.
- C. Provide protection from cold, water, heat, wind, and other environmental conditions.
- D. Roll as a unit.
- E. Splint injured extremities prior to movement whenever possible and as patient condition allows.
- F. All belts and restraining devices, designed to be used with a particular transport device, will be secured and fastened per the manufacturer's instructions prior to moving the patient onto that device.

SPECIAL CONSIDERATIONS/NOTES/PRECAUTIONS

- 1. Acceptable techniques/practices which should be considered when moving patients include:
 - a. Gurney/stretchers (optimal)
 - b. Wheelchair
 - c. Stair-Chair (if available)
 - d. Long Spine Board
 - e. KED (or similar device)
 - f. Scoop Stretcher
 - g. Sheet/Blanket carry
 - h. Chair carry
 - i. Two-person carry
 - j. Extremity carry (not preferred)
 - k. Patient ambulation