South Metro Fire Department

Clinical Policies and Procedures

Title: Patient Ambulation, Lifting, and Stretcher Operations

Effective Date: December 15, 2015

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Standard: Patient Care and Transport

Policy: South Metro Fire personnel shall use approved and safe techniques to

ensure the safety of patients and personnel during the physical movement, lifting, and transfer of patients to and from the ambulance.

I. Purpose

The purpose of this policy is to establish and promote safe and appropriate lifting techniques and practices to reduce the risk of injury and ensure consistent procedures for the safe conveyance of patients.

II. **Definition**

A. None

III. Procedure

- A. Patient movement from the scene to the ambulance is preferably accomplished via the stretcher or stair chair. However, under certain circumstances it may be appropriate to allow the patient to ambulate from the scene. The following are the general contraindications for allowing the patient to walk to the ambulance or into the hospital.
 - 1. Patient Complaint Based Contraindication to Ambulation:
 - Chest Pain
 - Dyspnea
 - Abdominal pain
 - Pregnancy greater than six 24 weeks
 - Pregnancy with complications regardless of gestational age
 - Dizziness or syncope
 - Recent loss of consciousness
 - Any pain or discomfort on ambulation
 - Vaginal bleeding
 - 2. Patient Assessment Based Contraindication to Ambulation
 - Altered mental status
 - Abnormal vital signs

- Respiratory distress
- Cardiac dysrhythmias
- Significant blood loss
- 3. Mechanism of Injury Based Contraindications to Ambulation:
 - Blunt or penetrating trauma to the head, chest, or abdomen
 - Spinal Injury
 - Injury to the lower extremities
 - Other significant injuries
- 4. Other Relative Contraindications to Ambulation:
 - Advanced age
 - General physical condition
 - Underlying physical disabilities
 - Distance, obstacles, and weather
- B. Scenes should be surveyed upon arrival for a safe stretcher entrance as well as safe exit.
 - 1. Paramedics/EMT's should "size up" the response scene to determine that the proper equipment and route for lifting and carrying of the patient.
- C. When doing any type of weighted lift, proper body mechanics must be used.
- D. In the case of more difficult lifts, consideration should be given to doing a four or six-person lift (e.g. inclement weather, heavy lifts, stairways, etc.)
- E. When doing assisted lifts, only personnel familiar with SMFD stretchers and proper lifting techniques should be used.
 - 1. Citizens or lay persons should only be utilized as a last resort in a lifting situation. Examples include, but are not limited to; patient's condition warrants immediate evacuation or MCI.
- F. Safety Officers (spotters) should be present and utilized to assist lifter(s) who may ascend or descend stairways or an unsafe walkway, by physically holding onto or stabilizing the lifter(s) as necessary to ensure they do not trip or fall.
- G. Consideration for using the stair chair or folding stretcher should be done when a stretcher lift would present a danger to the patient and/or medical personnel.
- H. If the situation arises when a backboard might be considered for angled tips, all straps must be utilized and consideration given to the use of fire department stokes basket.
- I. If a pediatric patient is carried to the ambulance in the arms of a paramedic or rescuer, a spotter shall directly escort that person by walking along side, or in the event of an unsafe or icy walkway, holding the arm of the person carrying the patient.
 - 1. For a spotter to be effective, they must keep both hands free and not be responsible for carrying any equipment at the same time as providing the escort.
- J. Stretcher Operations and Procedures

- 1. All SMFD patient care providers must be able to identify and proficiently operate each type of stretcher, folding stretcher, stair chairs, and loading system used in the company.
- 2. The following Patient Safety Restraint System (SRS) will be utilized on all patients transported by stretcher:
 - a) Over the shoulder safety restraints attached to the chest restraint system
 - b) Waist SRS
 - c) The lower extremity SRS.
- 3. Crew member position for a wheeled stretcher:
 - d) One member at the head of stretcher
 - e) One member at the foot of stretcher
- 4. All SMFD stretchers, folding stretchers, stair chairs, and loading systems will be operated in accordance with the manufacturer's operating instructions.
 - a. All SMFD providers will complete a training program and competency exams on all stretchers, folding stretchers, stair chairs, and loading systems used in the company.

K. Stretcher Inspection and Maintenance

- 1. Crews are required to inspect the stretcher assigned to their ambulance upon performing their daily vehicle inspection
- 2. Failure of the stretcher to perform any mechanical functions or obvious stretcher discrepancies found should be documented and immediately reported to an operations supervisor.
- Stretchers deemed unsafe in any way shall be tagged as defective and removed from service immediately. A back-up stretcher shall be acquired and placed for proper fitting and operation into the ambulance.

Previous Reviews/Revisions: 01/06, 12/09, 08/13