

First Responders - Safe Lifting and Moving of Patients



When an individual calls 911 for a medical emergency, the dispatch center will dispatch the local ambulance, and in some cases, the local fire and / or police departments will also be notified to assist. In the course of providing patient care, many EMT's, police officers, and firefighters are injured while lifting and moving patients. This Bulletin offers actionable points to help leaders and responders of those departments protect their crews.

The decision of when and how to move a patient is determined by many factors. In general, a patient should only be moved immediately (an emergency move) when there is an imminent life hazard to the patient or rescuer. When there is not an imminent threat, rescuers should pause to develop a plan for safely lifting and moving the patient.

Patient lifting and moving are critical skills that range from a routine procedure to a complex operation. Responders must consider two primary factors when making their plan; 1) how to move the patient while protecting the patient from further injury, and 2) how to protect themselves.

Have a Plan for Patient Lifts

Routine lifting and moving skills can be improved through practice. However, other emergency scenes require quick thinking and ingenuity. All responders must be on the same page when moving such a patient.

Pre-lift considerations include:

- The weight of the patient, and availability and response time of help versus the condition of the patient. Use a rough guideline of 1 rescuer per 75 - 100 pounds of patient weight (plus equipment), depending on accessibility and handholds. Know your own ability and limitations.
- Communicate the plan clearly and frequently with other rescuers. One person must take the lead.
- What lifting equipment is available? Which would best protect the patient and the rescuers?
- What is the response time for the nearest bariatric BLS unit?
- Can the patient be lifted safely from their current location, or should the crew slide the patient to a better location before attempting the lift?
- Once the patient is lifted, what is the best route to the ambulance? Is the pathway clear?
- How will rescuers move a patient sitting in a vehicle or other difficult or limited-access position?
- What if the initial plan does not work?

This bulletin is intended for general information purposes only. It should not be construed as legal advice or legal opinion regarding any specific or factual situation. Always follow your organization's policies and procedures as presented by your manager or supervisor. For further information regarding this bulletin, contact your Safety Director at 877.398.3046.

Prepare for Patient Lifts

Muscular-skeletal injuries from repetitive and heavy lifting are the most common causes of injury to EMTs, police officers, and firefighters. Department heads can use the following strategies to better prepare their personnel:

- Train and retrain on safe lifting techniques. Appropriate training time should be committed to developing skills and decision-making in areas where employees are being injured.
- Train with support agencies such as police and fire departments.
- Photograph or videotape patient handling drills to study body mechanics.
- Use situational drills and tabletop exercises to practice decision-making for patient handling.
- Periodically evaluate lifting aids such as power stretchers, stair chairs, mega movers, etc. New equipment and options are introduced each year.
- Debrief every significant patient handling incident. Even informal post-incident conversation with the crew can have a significant impact.

Body Mechanics for Patient Lifts

Proper body mechanics refers to the best way to use your body to move or lift a patient. Concentrate on protecting your back by keeping it locked in its natural S-shape and using the more powerful muscles in your legs to do the work. When lifting a patient remember the following key points:

- Get a stable and wide stance. When conditions permit, have your legs at least shoulder-width apart. Lock your lower back in its natural S-curve. Keep your head up, and your shoulders square.
- Check condition for the best footing. Be alert for surface conditions such as ice or oil, and obstacles such as curbs or small pets.
- If the patient is on the ground, lower your body by bending your knees and squatting down to the patient.
- Grasp the equipment you are using with your hands, palms facing upward.
- Keep the weight of the patient as close to your body as possible.
- Lift with your legs, not your back.
- Minimize twisting while lifting by selecting the best starting position.

Wellness

Patient handling can be a physically taxing skill that requires a high level of fitness. First responders need to follow a well-rounded program of weight training, cardiovascular exercise and stretching to ensure personal readiness for the demands of the job. Physical training and stretching have become requirements for many career public safety agencies for good reason. Studies show that a department-wide fitness and wellness program coupled with training on proper body mechanics and lifting techniques result in fewer injuries. Volunteer rescuers should commit to a personal program of exercise and stretching to withstand the physical demands of the job.

Unfortunately, first responders have been injured during training. Leaders of emergency response agencies should consider bringing in qualified trainers to demonstrate proper exercise form and to establish a comprehensive physical training program that targets the needs of rescuers.

Helping others in their times of need is an exciting and fulfilling career. Department leaders and a responders' sense of personal accountability can make it a safer career.