

Trauma Service Guidelines

Title: Halothoracic Brace Manual Handling Guideline
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See Also: [TRM03.03 Halo Thoracic Brace Care Guideline](#)

Raising / Lowering Patients in Bed with Halo Thoracic Brace

These guidelines should be read in conjunction with MH15.11 Patient Manual handling policy.

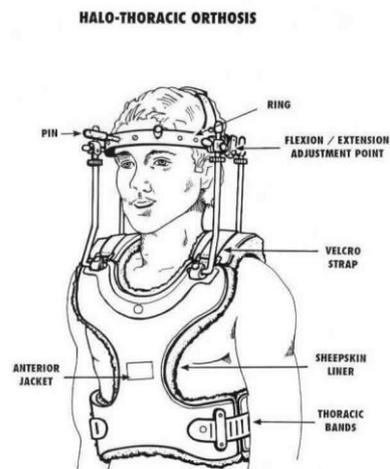
Purpose / Expected Outcome:

These guidelines describe the expected practice related to the management of patients with a Halo Thoracic Brace.

They aim to reduce:

- The risk to the patient of further neurological damage by preventing the brace dragging, digging in or catching on the bed as it is raised / lowered with the bed mechanics
- The associated manual handling risks to staff

The orthotist will explain the procedure to the ANUM, the nurse looking after the patient and the patient, at the time of the brace fitting.



Procedure – Sitting the patient forward

Task - 1	Sitting up a patient with halo brace
Method	One folded slide sheet / bed mechanics
Main Risk factors	Reaching, awkward postures, exerting high force, uneven loading
Patient/resident	Not able to assist
Description	Sitting the patient up in bed in order to carry out a particular procedure / task
No of Handlers	2 or 3 if patient is intubated
Procedure	<ul style="list-style-type: none"> ❖ Ensure patient is in correct position in bed - .e. the hips are positioning at the fold of the bed ❖ Roll patient and position folded slide sheet under the patient between patient hips and above shoulders with open end to the top ❖ Slowly lift the head of the electric bed ❖ Stopping intermittently to ensure slide sheet is not pooling ❖ Raise the patient legs to prevent slipping down the bed

As soon as applicable, patients should be taught to independently transfer using a slide lying position. **(see task 2)**

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Procedure – Sitting the patient on side of the bed.



This procedure can be used for assisting the patient to sit on the side of the bed, transfer to a chair, or stand up.

Task - 2	Sitting the patient on the side of the bed
Method	Patient body mechanics
Main Risk factors	Reaching
Patient/resident	Able to assist
Description	The patient transfers from lying to sitting on the side of the bed using their body mechanics
No of Handlers	1
Procedure	<ul style="list-style-type: none"> ❖ Encourage the patient to bend up their legs and roll onto their side ❖ Instruct the patient to position their hand / elbow at their chest level to enable them to push their upper body upwards (see figure 1.0) ❖ Position the patient feet at the edge of the mattress ❖ Slide the patients feet off the bed while the patient pushes through their hand / elbow and lifts their upper body off the bed, if required assistance can be provided via the shoulder and hip to achieve and upright position ❖ The patient will then sitting on the edge of the bed <p>See Figure 2</p>

References:

Worksafe Victoria 2006, Transferring People Safely, Public Sector and Community Services, 2nd Edition