



Emergency Medical Training Services

Emergency Medical Technician – Basic Program Outlines

Outline Topic: **LIFTING AND MOVING**

Revised: 11/2013

DEFINITIONS:

- Package - securing the patient for transport.

BODY POSITION

- Axial skeletal are important bones.
- Pull or drag "long axis" of the body to prevent excessive spinal movement.

BODY MECHANICS

- Lift with your legs not your back.
- Keep back straight.
- Keep feet equal distance of width to shoulders.
- Do not reach high.
- Hold objects close not away.
- Do not twist.
- Use a "power grip" with a "power lift".
- Get help before trying to lift something or someone with a lot of pounds.
- Replace weaker people with stronger ones if possible.

BACKBOARD CARRIES

- A minimum of two people needed but four is preferred.
- Always use a safety person if available to spot steps and problems and hold doors.
- DIAMOND CARRY
- 1 at head, 1 at legs, 1 at each hip. 4 total people.
- Problem: Once they get to the stretcher one hip person has to let go to move stretcher closer. The board weight with other rescuers is off.
- Rescuers feet are more likely to hit each others.
- FUNERAL CARRY - I don't know the official name. Also known as one hand carry.
- 2 at head and 2 at feet.
- Benefit: Rescuers legs are spread out. Easy to go thru doors. Better body mechanics can be used.
- Disadvantage: Board may sag in middle. Boards take 225 to 300 pounds only. If a patient is that large they will not fit on board to carry anyway. They go on a board to a stretcher right away and wheel on stretcher. Also add people as needed to stabilize the large patient.

GENERAL MOVING INSTRUCTORS

- Always use a safety person if available to spot steps and problems and hold doors.
- It is better to push than to pull as a general rule.

- Always keep head higher than feet when going up or down elevations.
- Head person coordinates all movement.

WHEELED STRETCHER

- Most used piece of equipment on an ambulance.
- 3 straps minimum to secure.
- Should be lowered when moving over rough surfaces.
- Side rails up when not doing patient care.

Stair Chair

- Moving people up and down stairs.
- Moving people in small areas. Hallway, airplane, etc...
- NOT USED ON SPINAL PATIENTS.

LONG BACK BOARD

- Preferred full body immobilization
- Minimum 3 straps. Must secure ball and socket joints to be effective.
- Narrow end is feet.
- Straps can make an "X" on chest or be straight across. It is up to medical director. Both have benefits.

PORTABLE STRETCHER

- Not used that often. If multiple patients and you need something to carry them.

SHORT BOARD

- Made from wood or metal.
- One brand name is the KED -Kendric's Extrication Devise. (Green color).
- Used on stable spinal patients found in seated position.
- DO NOT USE IF PATIENT IS UNSTABLE - TAKES TOO LONG OT PUT ON. GO DIRECTLY TO LONG BACK

BOARD.

SCOOP STRETCHER

- Used for full body immobilization in confined area.
- Can be extended and broken in to 2 halves.
- Good for hip/pelvis injuries to get under patient you cannot log roll
- Can pinch skin when putting back together.
- NOT GOOD FOR CPR PERSON. NO DIRECT SPINAL SUPPORT.

EMERGENCY MOVE

- The patient is not completely "packaged" before moving them.

- EVEN IF THE PATIENT IS CRITICAL NO SHORT CUTS ARE TAKEN WITH PACKAGING if scene is safe.
- Three reasons to move an unpackaged patients. 1) CPR is needed, 2) Hazards (traffic, guns, fire, explosion, etc...), 3) Move less critical patient to get to more critical patient.

EMERGENCY MOVES

- Drags - pull long axis. - clothing drag, body drag, blanket drag.
- Carry - only one in EMS - Fire Fighter carry.
- Walking Assist - help the victim walk.

URGENT AND NON-URGENT MOVES

- In this course they mean the same. The urgent patient is critical but the scene is safe so completely package them but do it faster. Non-urgent moves are a completely safe scene. THESE ARE COMBINED IN THIS COURSE. NO NEED TO SEPARATE. RULES ARE THE SAME. PACKAGE THEM FIRST.

NON-URGENT MOVES

- Direct ground carry - three or five people pick up victim and make a human backboard. - Hello? How about a stretcher, if available.
- Extremity Lift - very good. Cross patients arms in front of patient and come from back grabbing the patients wrists. This is good for wheel chair moves. You can add a person to hold feet.

- Draw sheet (or sheet draw) - when a sheet is under the patient and it is used like a taco shell and the patient is the meat. This takes time. That is why this is a non-urgent move.