



## Rogers Fire Department Standard Operating Procedures

<b>Policy Title:</b>	EMS Responder Safety		
<b>Policy Number:</b>	317	<b>Volume:</b>	Safety
<b>Approved By:</b>	Tom Jenkins	<b>Last Updated:</b>	March 2015
<b>CFAI Reference:</b>	7F.5,	<b>CAAS Reference:</b>	202.02.01, 202.06.01
<b>Revision Summary:</b>	Created – March 2015		

### PURPOSE

The purpose of this policy is to establish a policy that addresses the safety and health of responders during EMS incidents. Specifically, this policy will reflect industry best practices regarding patient lifting and moving techniques to prevent bodily harm to responders.

### POLICY

Members of the RFD regularly have to lift and move patients when providing emergency medical care and transportation. Injuries to responders should be minimized through adherence to best practices in lifting and moving patients.

The key to responder safety regarding the use of lifting equipment and the movement of patients is proper body mechanics. Before lifting the patient, the members should evaluate the situation, make certain they are aware of what needs to be done and ensure that they have the necessary equipment and assistance to accomplish the task. The following are best practices for body mechanics in moving patients:

- Holding the patient close helps balance and reduces strain on the arms and back.
- Keeping the feet apart provides a stable base, helps maintain balance, and leaves more energy for lifting.
- Members should use their arms and legs in proper proportion. Bending the elbows to hold the patient close is encouraged and will make lifting easier.
- Keeping a low center of gravity over a stable base expends less energy balancing the load, and more energy is available for lifting and carrying.
- If it is necessary to turn while lifting or moving something, it is better to change the position of the feet than to twist at the waist. By moving the feet, it is possible to balance the load being carried and minimize the strain on the back and abdominal muscles.

Lifting is always performed in unison with members on scene. The paramedic in charge of patient care, or the member tasked with moving the patient, should

communicate with others and make sure members know what to do in advance. Conducting the move of the patient at the same time is essential. Members are encouraged to count out loud to maintain good communication (e.g., “1-2-3 Move”). Sudden, jerky movements must be avoided. Good team communication is important.

### **Manual Stretcher Lifting Technique**

Lifting can be done safely by following these simple steps:

One foot is next to the stretcher and the other foot behind. The back is kept straight, chin tucked in, so the head and neck continue the straight back line. A firm grip on the lower stretcher bars with the palms of the hands is necessary, because the palms are stronger than the fingers alone. Both members must be properly situated by drawing the stretcher close, with arms and elbows tucked under the sides of the bodies to keep body weight centered. Members should use teamwork and a standard “1-2-3” count, lifting straight up using the strength of their legs.