

**Module 5: Body Mechanics**

**Minimum Number of Theory Hours: 2**

**Recommended Theory Hours: 4**

**Recommended Clinical Hours: 4**

**Statement of Purpose:**

The purpose of the unit is to provide students with an understanding of efficient and proper use of the body in performing tasks related to the role of the CNA. Students will understand the principles of positioning and transporting patients/residents and will implement these principles when providing patient/resident care.

**Terminology:**

1. Activities of Daily Living (ADL)
2. Alignment
3. Ambulate
4. Base of support
5. Body mechanics
6. Dangle
7. Dorsal recumbent
8. Fowler's position
9. Gait belt
10. Grasp
11. Hoyer lift
12. Lateral position
13. Lift/draw/turn
14. Lift team
15. Lithotomy
16. Logroll
17. Mechanical lift
18. Pivot
19. Prone position
20. Sim's position
21. Supine position
22. Trapeze
23. Trendelenburg
24. Total Quality Improvement (TQI)
25. Work-related musculoskeletal disorder (WRMD)

Patient, resident, and client are synonymous terms referring to the person receiving care

**Performance Standards (Objectives):**

Upon completion of the two (2) hours of class plus homework assignments and four (4) hours of clinical experience, the learner will be able to:

1. Define key terminology.
2. Explain the purpose and rules of proper body mechanics.
3. Identify comfort and safety measures used to lift, turn, move, and position patients/residents in bed.
4. List and describe body positions for bedridden patients/residents.
5. Describe patient/resident transfers.
6. Describe appropriate body mechanics used to ambulate a patient/resident.

**References:**

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Content Outline	Recommended Teaching Strategies and Assignments	Clinical Demonstration/ Method of Evaluation
<p><b>Objective 1</b>  <b>Define key terminology</b>                      A. Review the terms listed in the terminology section                      B. Spell the listed terms accurately                      C. Pronounce the terms correctly                      D. Use the terms in their proper context</p>	<p>A. Lecture/Discussion                      B. Games: word searches, crossword puzzles, Family Feud, Jeopardy, bingo, spelling bee, hangman, and concentration                      C. Encourage use of internet, medical dictionary, and textbooks                      D. Create flashcards for learning purposes</p>	<p>A. Have students select five words from the list of key terminology and write a sentence for each defining the term                      B. Administer vocabulary pre-test and post-test                      C. Uses appropriate terminology when charting and reporting to licensed personnel</p>
<p><b>Objective 2</b>  <b>Explain the purpose and rules of proper body mechanics.</b>                      A. Proper body mechanics ensures the Nurse Assistant is using the body in an efficient and safe way                          1. Practice body mechanics at all times                          2. Everyone should use good body mechanics even patients/residents and families                          3. Protects both employee and patient/resident from injury                      B. Basic rules of body mechanics                          1. Assess the “job” to be done                          2. Use wide base of support; feet 12 inches apart or shoulder width                          3. Use stronger, larger muscle groups like legs, not the back and arms                          4. Use correct posture and keep body aligned – back straight, knees bent                          5. Keep objects close to body when lifting or carrying</p>	<p>A. Lecture/Discussion                      B. Show pictures or video on proper body mechanics                      C. Handout 5.2a- Body Mechanics Crossword                      D. Handout 5.2b- Body Mechanics Crossword-KEY</p>	<p>A. Written test                      B. Uses proper body mechanics when performing patient/resident care tasks</p>

<ul style="list-style-type: none"> <li>6. Never twist your body, turn or pivot feet – face work</li> <li>7. Push, slide, or pull heavy objects instead of lifting – pivot</li> <li>8. Avoid sudden jerky motions; use smooth movements</li> <li>9. Use both hands when lifting</li> <li>10. Team work – one leader who communicates/directs the group</li> <li>11. Explain procedure to patient/resident</li> </ul> <p>C. Legal and Total Quality Improvement (TQI) issues</p> <ul style="list-style-type: none"> <li>1. Legal             <ul style="list-style-type: none"> <li>a. Must protect and safeguard patient/resident</li> <li>b. Skin abrasion is reason for citation and a reportable incident</li> </ul> </li> <li>2. TQI issue:             <ul style="list-style-type: none"> <li>a. Back injuries-refer to Work-related musculoskeletal disorder (WRMD)</li> <li>b. Patient/resident safety-refer to OSHA</li> </ul> </li> </ul>		
<p><b>Objective 3: Identify comfort and safety measures used to lift, turn, move, and position patients/residents in bed.</b></p> <ul style="list-style-type: none"> <li>A. Comfort measures for lifting and moving patients/residents             <ul style="list-style-type: none"> <li>1. Inform the patient/resident of what you are doing and why</li> <li>2. Provide privacy</li> <li>3. Raise bed to working height to promote safe body mechanics</li> <li>4. Position the patient/resident in proper body alignment</li> <li>5. Use pillows and/or foam pads to support and cushion the patient/resident and protect bony prominences</li> <li>6. Protect all tubing</li> <li>7. Do not slide or drag to prevent skin shearing, abrasion, tear</li> </ul> </li> <li>B. Safety measures for lifting and moving patients/residents             <ul style="list-style-type: none"> <li>1. Assess the task                 <ul style="list-style-type: none"> <li>a. Size up the load</li> <li>b. Obtain help if needed                     <ul style="list-style-type: none"> <li>1) If more than two people are needed, a mechanical lift is recommended</li> <li>2) Some facilities have a lift team</li> </ul> </li> </ul> </li> <li>2. Using appropriate body mechanics, reposition patient/resident in bed</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>A. Lecture/Discussion</li> <li>B. Demonstrate stoop, reach, lift, pivot, push/pull, and carry close techniques</li> <li>C. Demonstrate use of pull/draw sheet, gait belt</li> <li>D. Show videos demonstrating techniques</li> <li>E. Manual Skills 5.3a- Turning and Positioning the Patient/resident</li> <li>F. Manual Skills 5.3b- Moving the Helpless Patient/resident to Head of Bed</li> </ul>	<ul style="list-style-type: none"> <li>A. Written test</li> <li>B. Uses proper body mechanics to move patient/resident up in bed with single or double assist</li> </ul>

<ul style="list-style-type: none"> <li>a. Move the patient/resident up in bed             <ul style="list-style-type: none"> <li>1) Use lift sheet if appropriate</li> <li>2) Two people needed to move patient/resident and should stand at head of bed</li> </ul> </li> <li>b. Turn patient/resident on side             <ul style="list-style-type: none"> <li>1) Move patient/resident toward Nurse Assistant</li> <li>2) Move patient/resident away from Nurse Assistant</li> <li>3) Log roll patient/resident – all one position like a log with two Nurse Assistants</li> </ul> </li> <li>3. Why turn, lift, move and position patient/resident             <ul style="list-style-type: none"> <li>a. Comfort</li> <li>b. Prevent skin breakdown</li> <li>c. Stimulates body systems</li> <li>d. Encourages patient/resident to do ADL</li> </ul> </li> </ul>	<p>using Two Assistants</p>	
<p><b>Objective 4</b>  <b>List and describe body positions for bedridden patients/residents.</b></p> <ul style="list-style-type: none"> <li>A. Positioning the patient/resident             <ul style="list-style-type: none"> <li>1. Technique                 <ul style="list-style-type: none"> <li>a. Do at least every two hours</li> <li>b. Use lift-sheet and move patient/resident to opposite side of bed you wish to turn the patient/resident to (for side lying position)</li> <li>c. Turn and position</li> </ul> </li> <li>2. Basic positions                 <ul style="list-style-type: none"> <li>a. Supine – back</li> <li>b. Prone – abdomen</li> <li>c. Lateral – side</li> <li>d. Sim’s</li> <li>e. Fowler’s</li> <li>f. Semi-Fowler’s</li> <li>g. Trendelenberg</li> <li>h. Reverse Trendelenberg</li> <li>i. Lithotomy</li> </ul> </li> </ul> </li> <li>B. Use supportive devices to provide comfort and support limb position (pillows and foam wedges)</li> </ul>	<ul style="list-style-type: none"> <li>A. Lecture/Discussion</li> <li>B. Demonstrate positioning</li> <li>C. Share policies from facilities used for clinical</li> <li>D. Manual skills 5.4- Positions on side</li> </ul>	<ul style="list-style-type: none"> <li>A. Written test</li> <li>B. Properly positions patients/residents in five basic positions using supportive devices</li> </ul>

<p><b>Objective 5</b>  <b>Describe patient/resident transfers.</b></p> <p>A. Transfers</p> <ol style="list-style-type: none"> <li>1. Bed to chair</li> <li>2. Chair to bed</li> <li>3. Bed to gurney</li> </ol> <p>B. Transfer techniques</p> <p>C. Assistive equipment used to transfer patients/residents</p> <ol style="list-style-type: none"> <li>1. Mechanical lift</li> <li>2. Trapeze – patient/resident uses arms to help lift</li> <li>3. Slide board – requires at least two healthcare workers to turn sheet to “slide” patient/resident over</li> <li>4. Gait belt (transfer belt)             <ol style="list-style-type: none"> <li>a. Use to promote safety</li> <li>b. Apply to patient’s/resident’s waist</li> <li>c. Check for wounds, colostomy, and tubes on abdomen prior to application of belt</li> <li>d. Apply over clothing, not next to skin</li> <li>e. Check if belt is too tight or too loose</li> <li>f. Watch for continued proper placement of gait belt</li> </ol> </li> </ol>	<p>A. Lecture/Discussion</p> <p>B. Demonstrate and return demonstration of transfer techniques</p> <p>C. Practice using slide board and turn sheet</p> <p>D. Manual skills 5.5a- Assisted Transfer from Bed to Chair/Wheelchair and Return to Bed</p> <p>E. Manual skills 5.5b- Mechanical Lift</p>	<p>A. Written test</p> <p>B. Uses proper techniques when transferring patient/resident from bed to chair and chair to bed</p> <p>C. Uses transfer equipment at facility</p>
<p><b>Objective 6</b>  <b>Describe appropriate body mechanics used to ambulate a patient/resident.</b></p> <p>A. Ambulation procedures</p> <ol style="list-style-type: none"> <li>1. Dangle before ambulation</li> <li>2. Ambulate patient/resident</li> <li>3. Ambulate patient/resident with assistive devices             <ol style="list-style-type: none"> <li>a. Walker</li> <li>b. Cane</li> <li>c. Gait belt</li> </ol> </li> </ol> <p>B. Prevention of injury if fall occurs during ambulation</p> <ol style="list-style-type: none"> <li>1. Protection of patient/resident             <ol style="list-style-type: none"> <li>a. Guide the patient/resident to the floor</li> <li>b. Protect the patient’s/resident’s head</li> <li>c. Keep firm grip on the gait belt</li> </ol> </li> <li>2. Protection of self</li> </ol>	<p>A. Lecture/Discussion</p> <p>B. Show video ambulation techniques</p> <p>C. Demonstrate and return demonstration of</p> <ol style="list-style-type: none"> <li>a. Protective fall procedure</li> <li>b. Ambulation techniques</li> </ol> <p>D. Manual skills 5.6a- Assisted Ambulation of Patient/resident</p> <p>C. Manual skills 5.6b-</p>	<p>A. Written test</p> <p>B. Uses proper techniques when ambulating patient/resident</p> <p>C. Uses gait belt as required</p>

<ul style="list-style-type: none"> <li>a. Keep back straight</li> <li>b. Slide patient/resident to floor using the upper leg for support</li> </ul>	<p>Assisting the Patient/resident to Ambulate with Walker/Cane</p> <p>D. Manual skills 5.6c- Assists to ambulate using a transfer belt</p>	
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**Sample Test: Module 5- Body Mechanics**

1. The best reason to use proper body mechanics is to:
  - A. Avoid lifting
  - B. Prevent injury to the patient as well as the Nurse Assistant
  - C. Prevent damage to the equipment in the facility
  - D. Use back to lift heavy objects
  
2. The patient/resident is positioned in bed with the head of the bed in a partial sitting position at a 45 degree angle. This position is referred to as the:
  - A. Prone position
  - B. Supine position
  - C. Sim's position
  - D. Semi-fowler's position
  
3. When placing a patient/resident in the lateral position, you promote good body alignment by placing pillows for support under the:
  - A. Head, abdomen and upper arms
  - B. Head, shoulders and ankles
  - C. Head, upper arm, upper leg and behind the back
  - D. Head, lower back, arms and patient's/resident's sides
  
4. The Nurse Assistant has been asked to assist a patient/resident with ambulation. During the procedure, the Nurse Assistant should:
  - A. Stand behind the patient/resident and provide support by holding the patient/resident around the waist
  - B. Walk beside the patient/resident with the assistant's arm locked with the patient's/resident's arm
  - C. Walk in front of the patient/resident with patient's/resident's hands placed on the assistant's shoulders for support
  - D. Walk slightly behind and to one side of patient/resident providing support with the gait belt
  
5. Nurse Assistants are encouraged to use a gait belt when assisting with patient transfers. The purpose of a gait belt is to:
  - A. Hold the patient's/resident's clothing in place
  - B. Support the patient/resident when seated and protect the patient/resident from falling out of the chair
  - C. Assist in transferring a dependent patient/resident and protect both the patient/resident and Nurse Assistant from injury
  - D. Provide a safety handle for the patient/resident

6. Once an object has been lifted, the Nurse Assistant should keep the object:
  - A. Under your arm
  - B. Held to the side of the body
  - C. As close to the body as possible
  - D. In front of the body at shoulder height
  
7. When the Nurse Assistant is moving a patient/resident toward the head of the bed, they should remove:
  - A. The foot cradle from the bed and place on floor
  - B. The pillow from under the patient's/resident's head and place it against the headboard
  - C. The bed covers from the patient/resident and fold at the end of the bed
  - D. Any traction equipment that may be attached to the bed
  
8. When assisting a patient/resident with left sided weakness to transfer from the bed to a chair, the chair should be located:
  - A. At the head of the bed, on patient's/resident's right side
  - B. At the foot of the bed, on patient's/resident's left side
  - C. At the middle of the bed directly across from where the patient/resident sits in the bed
  - D. Across the room to encourage the patient/resident to get up and walk
  
9. When positioning a patient/resident in a side lying position, the Nurse Assistant must first:
  - A. Log roll the patient/resident toward the nearest side rail
  - B. Move the patient/resident toward the foot of the bed
  - C. Move the patient/resident to the side of the bed where the Nurse Assistant is standing
  - D. Log roll the patient/resident toward the opposite side rail by yourself
  
10. When a patient/resident is in good body alignment it means that the patient's/resident's:
  - A. Head is in a straight line with the spine
  - B. Arms and legs are positioned in a flexed position
  - C. Body is used in a careful and efficient manner
  - D. Performing exercises to provide movement for the joints
  
11. Before performing any task at the bedside, the Nurse Assistant should:
  - A. Elevate the bed to a comfortable position to help
  - B. Lower the bed to the lowest position to prevent the patient from falling out of bed
  - C. Move surrounding furniture away from the bed so the Nurse Assistant won't bump into it
  - D. Elevate the head of the bed so that the patient/resident can observe what you are doing

12. Which of the following describes the prone position?
- A. Lying on the left side with the upper leg flexed
  - B. Lying on the back with toes pointed toward the foot of the bed
  - C. Lying on the abdomen with the head turned to one side
  - D. A semi-sitting position with knees flexed
13. A patient/resident is being transferred back to bed after being up in the wheelchair for a long period of time. As the Nurse Assistant you can best protect your back by:
- A. Using the stronger muscles of your lower arms and back
  - B. Keeping a wide base of support and keeping the patient/resident as close as possible to you as you perform the transfer
  - C. Pulling the patient/resident with sudden jerky movements so that you are able to move the patient/resident alone
  - D. Providing a lot of space between you and the patient/resident so that you have room for movement
14. Miss Polly Walker has the head of her bed elevated 60 degrees. This position is referred to as:
- A. The supine position
  - B. Fowler's position
  - C. Sims' position
  - D. The prone position
15. Your patient/resident is paralyzed from the waist down (paraplegia) and has maintained good upper body strength. The patient/resident wants to be able to move himself in bed, somewhat, without assistance. Which of the following pieces of equipment might be used for this purpose?
- A. Gurney
  - B. Gait belt
  - C. Trapeze
  - D. Pillow
16. Two surfaces rub together. This is called:
- A. Friction
  - B. Shearing
  - C. Pressure
  - D. Ergonomics
17. Good body alignment is needed:
- A. When standing
  - B. When sitting
  - C. When lifting
  - D. All the time

18. When giving bedside care, the bed should be:
- A. At its highest horizontal level
  - B. At its lowest horizontal level
  - C. Level with your waist
  - D. In Fowler's position
19. Before moving Mr. G up in bed, you need to:
- A. Put nonskid footwear on him
  - B. Lock the bed wheels
  - C. Apply a transfer belt
  - D. Raise the head of the bed
20. You need to transfer Mr. H with a transfer belt. The belt is applied:
- A. After the transfer
  - B. Under his clothing
  - C. Over his clothing
  - D. On his legs
21. Mr. H has weakness on his right side. Where should you position the wheelchair?
- A. Next to the bed on his right side
  - B. Next to the bed on his left side
  - C. At the foot of the bed
  - D. At the head of the bed
22. To prevent falls during transfers, wheelchair, bed, shower chair, and stretcher wheels must:
- A. Be fully inflated
  - B. Be locked
  - C. Make noise
  - D. Be clean
23. After transferring Ms. G to the toilet, you should:
- A. Close the bathroom door and stay in her room
  - B. Close the bathroom door and leave the room
  - C. Stay in the bathroom with her
  - D. Leave the room

24. When ambulating, a patient/resident should be wearing:
- A. Socks
  - B. Bedroom slippers
  - C. Nonskid shoes
  - D. Shower thongs
25. The Nurse Assistant is ambulating a patient/resident with a gait belt. If the patient/resident begins to fall, the Nurse Assistant should:
- A. Lower the patient/resident into a chair
  - B. Hold the patient/resident up
  - C. Gently lower the patient/resident to the floor
  - D. Call out for assistance
26. The Nurse Assistant can prevent a weak patient/resident from falling in the shower by providing a:
- A. Shower chair
  - B. Pick-up walker
  - C. Gait belt
  - D. Three-prong cane
27. An example of poor body mechanics is:
- A. Keeping objects close to the body when lifting them
  - B. Keeping knees straight when working at the bedside
  - C. Keeping feet apart to provide a wide base of support
  - D. Pushing heavy objects rather than lifting them
28. When transferring a patient/resident with a mechanical lift (Hoyer lift), the patient's/resident's arms should be:
- A. Holding the sling
  - B. On her chest
  - C. Over her head
  - D. Dangling at her side

**Sample Test Answers: Module 5**

1. B
2. D
3. C
4. D
5. C
6. C
7. B
8. A
9. C
10. A
11. A
12. C
13. B
14. B
15. C
16. A
17. D
18. C
19. B
20. C
21. B
22. B
23. A
24. C
25. C
26. A
27. B
28. B

**MANUAL SKILL: Turning and Positioning the Patient/resident**

**EQUIPMENT:**

Pillows

**BEGINNING STEPS:**

1. Wash hands
2. Knock and pause before entering the patient's/resident's room
3. Introduce self
4. Identify patient/resident
5. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact
6. Gather equipment, if applicable
7. Provide for privacy with a curtain, door, or screen
8. Apply gloves, if necessary

**SKILL STEPS:**

1. Raise the bed to your working height; make sure wheels are locked and the top sheet and blanket is loosened.
2. Lower side rail nearest you. Be sure the opposite side rail is elevated and locked in place.
3. Slide arms under patient's/resident's shoulders and, using good body mechanics, move the patient's/resident's legs toward you on your arms.
4. Slide both arms under the patient's/resident's buttock (upper thighs and lower back) and, using good body mechanics, move the patient's/resident's buttocks toward you on your arms.
5. Slide both arms under the patient's/resident's lower legs and, using good body mechanics move the patient's/resident's shoulders toward you on your arms.
6. Cross the patient's/resident's arm across his/her chest.
7. To turn the patient/resident away from you, cross the leg nearest to you over the far leg at the ankle, or bend the knee up with foot on bed.
8. Place one hand on the patient's/resident's shoulder nearest you and your other hand on the hip nearest you.
9. Turn the patient/resident gently to his/her side facing away from you. Make sure patient/resident will not be lying too close to either side rail. Spine should be straight and in alignment with the bed. Extended bottom leg should be in alignment with back and shoulder.
10. Position a pillow lengthwise against the patient's/resident's back for support. Place pillow under top arm with arm slightly flexed

and in front of patient/resident. Shoulder, elbow, and wrist should be supported to the same height. Place pillow(s) between legs with top leg slightly flexed and forward. Hip, knee, and ankle should be supported to the same height. The bottom arm should be flexed with



palm of hand facing up. Support the patient's/resident's head in one hand and slide a pillow under the head and neck using the other hand. (Be sure the patient's/resident's ear is not bent).

11. Make sure patient/resident is in correct body alignment, and is comfortable.
12. Straighten top linen.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Dispose of gloves (without contaminating self) into correct waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Place bed in low position
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

**MANUAL SKILL: Moving the Helpless Patient/resident to the Head of the Bed Using Two Assistants.**

**EQUIPMENT:**

Lift sheet

**BEGINNING STEPS:**

1. Wash hands
2. Knock and pause before entering the patient's/resident's room
3. Introduce self
4. Identify patient/resident
5. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact
6. Gather equipment, if applicable
7. Provide for privacy with a curtain, door, or screen
8. Apply gloves (standard precautions)

**SKILL STEPS:**

1. Have a co-worker help in this procedure.
2. Raise the bed to the position most comfortable for you during lifting. Lower the head and foot of the bed if raised.
3. Position your co-worker on one side of the bed and yourself on the other side.
4. Both of you should lower the side rail beside you.
5. Remove the pillow from under the patient's/resident's head and place it against the headboard (this prevents the patient's/resident's head from hitting the headboard).
6. Cross the patient's/resident's arms across the chest.
7. The co-worker, using both hands, rolls to the edge of the lift sheet close to the patient's/resident's side, thus forming a secure handle. Make sure the lift sheet is positioned from above the patient's/resident's shoulders to below the buttocks. Grasp the rolled sheet with your hands at the patient's/resident's shoulders and at the hips.
8. Stand with your feet about twelve inches apart (or shoulder width), turn your body and your feet slightly toward the head of the bed.
9. Even when the patient/resident appears unable to understand, explain that on the count of three, he or she will be moved to the head of the bed.
10. Keeping your back straight, bend slightly at the hips and knees.
11. At the count of three, shift your weight from your back foot to your forward foot, while sliding patient/resident toward head of bed.

12. Unroll the lift sheet.
13. Tighten the bottom sheet and lift sheet, making certain no wrinkles remain under the patient's/resident's body.
14. Reposition the patient/resident. Replace pillows under the head and shoulders, between legs and at the back if in a side-lying position.
15. Assess for comfort, place the nurse call signal within easy reach, and thank the patient/resident and your co-worker.
16. Raise the side rails, then adjust the head and foot of the bed and lower the bed to lowest position.

**To turn the patient/resident towards you:**

1. Follow criteria 1-8 above
2. Be sure the patient/resident is lying in the middle of the bed
3. Raise the side rail nearest you
4. If possible cross the leg farthest from you over the near leg
5. Reach across the patient/resident and put one hand behind the far shoulder
6. Put the other hand behind the far hip and gently roll the patient/resident toward you
7. Position using pillows as described above
8. Make sure patient/resident is in correct body alignment
9. Straighten and tuck in the top linen
10. Raise side rail, lower bed, and position call light within reach

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

**MANUAL SKILLS: Positions on Side**

**EQUIPMENT:**

Pillows

**BEGINNING STEPS:**

1. Gather equipment, if applicable
2. Wash hands
3. Knock and pause before entering the patient's/resident's room
4. Introduce self
5. Identify patient/resident
6. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact
7. Provide for privacy with a curtain, door, or screen

**SKILL STEPS:**

1. Raises side rail on side to which the body will be turned
2. Slowly roll onto side as one unit toward raised side rail
3. Places or adjusts pillow under head for support
4. Patient/resident is positioned so they are not lying on arm
5. Supports top arm with supportive device
6. Places supportive device behind patient's/resident's back
7. Places supportive device between legs with top knee flexed; knee and ankle supported

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Position patient/resident comfortably
3. Place call light within reach
4. Lower bed to safe position for the patient/resident
5. Leave room neat
6. Wash hands
7. Document



**MANUAL SKILL: Assisted Transfer from Bed to Chair/Wheelchair and Return to Bed.****EQUIPMENT:**

Chair or wheelchair  
Gait belt  
Non-skid shoes/footwear

**BEGINNING STEPS:**

1. Wash hands
2. Knock and pause before entering the patient's/resident's room
3. Introduce self
4. Identify patient/resident
5. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact
6. Gather equipment, if applicable
7. Provide for privacy with a curtain, door, or screen
8. Apply gloves (standard precautions)

**SKILL STEPS:**

1. Position wheelchair close to bed with arm of the wheelchair almost touching the bed.
2. Position wheelchair on patient's/resident's strong side with brakes locked and footrests removed, flipped back against chair and out of the way, or flipped up and out of the way.
3. Place non-skid shoes on patient's/resident's feet.
4. Help patient/resident sit on side of bed with feet flat on floor.
5. Assess patient/resident for tolerance to an upright position, such as dizziness or nausea.
6. Place gait belt around the patient's/resident's waist outside of his/her clothes.
  - a. With transfer (gait) belt. Stand in front of patient/resident, positioning self to ensure safety of Nurse Assistant and patient/resident during transfer (e.g. knees bent, feet apart, back straight), place belt around patient's/resident's waist and grasp belt (upward grasp).
  - b. Without transfer belt. Stand in front of patient/resident, positioning self to ensure safety of Nurse Assistant and patient/resident during transfer (e.g. knees bent, feet apart, back straight, arms around patient's/resident's torso under the arms).
7. Stand in front of patient/resident. Place your feet about shoulder width apart (or 12 inches apart) with the patient's/resident's weak

leg between your knees. Have patient/resident rest his/her hands on your shoulder, upper arms, or your waist. Note:  
Patient/resident should not put his/her arms around your neck.

8. Firmly grasp the gait belt at the patient's/resident's sides.
9. On count of three, help patient/resident to stand, supporting weak leg with your knees.
10. Pivot with the patient/resident toward the chair (which is toward the patient's/resident's strong side).
11. Have the patient/resident grasp the arm of the wheelchair.
12. When patient/resident is in proper position, lower the patient/resident slowly into the chair, bending your knees, using the strength of your legs, and keeping your back straight.
13. Reposition patient/resident with hips touching back of the wheelchair and remove transfer belt, if used.
14. Re-adjust or re-apply footrests if used and place signaling device within reach.
15. To return the patient/resident to bed, place the wheelchair on the patient's/resident's strong side, with brakes locked and footrests up, removed or flipped back out of the way, then repeat steps 12 to 16 to move the patient/resident from the chair to the bed.
16. Remove the patient's/resident's shoes or slippers.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse



**MANUAL SKILL: Mechanical Lift**

**EQUIPMENT:**

Hydraulic/Mechanical lift  
Sling  
Wheelchair or chair

**BEGINNING STEPS:**

1. Wash hands
2. Knock and pause before entering the patient's/resident's room
3. Introduce self
4. Identify patient/resident
5. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact
6. Gather equipment, if applicable
7. Provide for privacy with a curtain, door, or screen
8. Apply gloves (standard precautions)

**SKILL STEPS:**

1. Secure co-worker to assist
2. Position chair
3. Position sling under the patient/resident by turning the patient/resident side to side. The sling should firmly support the patient's/resident's torso from shoulder to knees
4. Protect patient/resident from injury from metal bars/rings
5. Position the lift over the patient/resident with the base beneath the bed and locked in its widest position
6. Attach sling to mechanical lift with the hooks or straps in place through the metal frame. Be sure to apply hooks with open, sharp end facing away from patient/resident, if present
7. Have patient/resident fold both arms across chest, if possible
8. Inform patient/resident and staff members that lift is going to begin
9. Raise sling so it is clear of the bed
10. Have the assisting co-worker guide the patient's/resident's legs
11. Move lift back until patient/resident is centered over wheelchair
12. Carefully lower patient/resident into chair

13. Remove straps, hooks and bars from sling leaving sling in place while the patient/resident is in the chair
14. To return patient/resident to bed, reverse above procedure and turn patient/resident side to side when in bed to remove sling

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

**Manual Skills: Transfers from Bed to Wheelchair Using Transfer Belt**

**EQUIPMENT:**

Transfer belt  
Wheelchair

**BEGINNING STEPS:**

1. Gather equipment, if applicable
2. Wash hands
3. Knock and pause before entering the patient's/resident's room
4. Introduce self
5. Identify patient/resident
6. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible
7. Privacy provided with a curtain, screen, or door

**SKILL STEPS:**

1. Before assisting to stand.
  1. Wheelchair is positioned alongside of bed, at head of bed facing the foot or foot of bed facing head
  2. Footrests are folded up or removed
  3. Bed is at a safe level
  4. Wheels are in locked position on wheelchair
  5. Check and/or locks bed wheels
  6. Patient/resident is assisted to a sitting position with feet flat on the floor
  7. Nurse Assistant ensures Patient/resident is wearing shoes
  8. Apply transfer belt securely over clothing/gown
  9. Provide instructions to enable patient/resident to assist in transfer including prearranged signal to alert when to begin standing
2. Stands facing patient/resident positioning self to ensure safety of Nurse Assistant and patient/resident during transfer. Counts to three (or says other prearranged signal) to alert patient/resident to begin standing.
3. On signal, gradually assists patient/resident to stand by grasping transfer belt on both sides with an upward grasp (Nurse Assistant's hands are in upward position) and maintaining stability of patient's/resident's legs.
4. Assists patient/resident to turn to stand in front of wheelchair with back of patient's/resident's legs against wheelchair.

5. Lowers patient/resident into wheelchair.
6. Positions patient/resident with hips touching back of wheelchair and transfer belt is removed.
7. Positions feet on foot rests.
8. After completing skill, wash hands.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Position patient/resident comfortably
3. Place call light within reach
4. Leave room neat
5. Wash hand.
6. Document
7. Report abnormal findings to licensed nurse

**MANUAL SKILL: Assisted Ambulation of Patient/resident****EQUIPMENT:**

Gait belt  
Robe  
Shoes/non-skid slippers

**BEGINNING STEPS:**

1. Obtain information on patient's/resident's capabilities such as:
  - A. Distance able to ambulate
  - B. Assistive device used
  - C. Number of people needed
  - D. Any weaknesses
2. Wash hands
3. Knock and pause before entering the patient's/resident's room
4. Introduce self
5. Identify patient/resident
6. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible
7. Gather equipment, if applicable
8. Provide for privacy with a curtain, door, or screen
9. Apply gloves (standard precautions)

**SKILL STEPS:**

1. Lower bed to safe level and lower nearest side rail.
2. Assist the patient/resident to move to the side of the bed and to sit on the side of the bed, with feet flat on floor.
3. Assist the patient/resident to put on robe and shoes/non-skid slippers.
  - A. See page 32-33 With transfer (gait) belt.
  - B. Without transfer belt. Stand in front of patient/resident, positioning self to ensure safety of Nurse Assistant and patient/resident during transfer (e.g. knees bent, feet apart, back straight, arms around patient's/resident's torso under the arms).
4. Stand facing the patient/resident with your feet shoulder-width apart.
5. Have the patient/resident place his/her hands on your waist.

6. Grasp the gait belt firmly at each side of the patient/resident.

7. Brace your knees against the patient's/resident's knees.
8. Block the patient's/resident's feet from sliding with your feet.
9. On signal, assist the patient/resident up into a standing position as you straighten your knees.
10. Move behind and slightly to one side of the patient/resident.
11. Grasp the gait belt with one hand and support the patient/resident as needed with the other hand. Do not let go of the gait belt.
12. Walk with the patient/resident with your gait matching the gait of the patient/resident.
13. Frequently assess the patient/resident for dizziness, weakness and need to rest.
14. After ambulation, assist patient/resident to a position of comfort and safety in bed and remove transfer belt, if used.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

**MANUAL SKILL: Assisting the Patient/resident to Ambulate with Walker/Cane****EQUIPMENT:**

Gait belt (as needed)  
Shoes or non-skid slippers  
Walker or cane

**BEGINNING STEPS:**

1. Obtain information on patient's/resident's capabilities such as
  - a. Distance able to walk
  - b. Type of assistive device
  - c. Number of people
  - d. Needs and weaknesses
2. Wash hands
3. Knock and pause before entering the patient's/resident's room
4. Introduce self
5. Identify patient/resident
6. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible
7. Gather equipment, if applicable
8. Provide for privacy with a curtain, door, or screen
9. Apply gloves (standard precautions)

**SKILL STEPS:**

1. Lower bed to lowest position.
  - a. With transfer (gait) belt: Stand in front of patient/resident, positioning self to ensure safety of Nurse Assistant and patient/resident during transfer (e.g. knees bent, feet apart, back straight), place belt around patient's/resident's waist and grasp belt.
  - b. Without transfer belt: Stand in front of patient/resident, positioning self to ensure safety of Nurse Assistant and patient/resident during transfer (e.g.) knees bent, feet apart, back straight, arms around patient's/resident's torso under the arms).
2. Place shoes or non-skid slippers on patient's/resident's feet.
3. Check walker or cane for worn or loose parts and appropriate height.
4. Place walker or cane close by the patient/resident.



5. Assist patient/resident to stand, count "1, 2, 3."

6. Hand patient/resident the cane or place walker in front of patient/resident within reach.
7. Have patient/resident use their arms on chair arm to push self to standing position and grasp walker/cane.
8. The cane is to be held on the strong side.
9. The patient/resident should advance cane 10-12 inches followed by weaker leg and then stronger leg.
10. To use a walker, have patient/resident advance walker six inches
  - a. Patient/resident then should move weaker leg forward into walker, followed by stronger leg.
  - b. Keep patient/resident in the center of the walker.
  - c. All four corners of the walker should be in contact with the floor before patient/resident places weight on walker.
11. If using a gait belt, stand slightly behind the patient/resident on the weaker side with hand grasping the belt at patient's/resident's mid-back.
12. After ambulation, return patient/resident to bed or chair
  - a. Have patient/resident walk within a step of bed or chair.
  - b. Place cane or walker to side.
  - c. Assist patient/resident to turn around.
  - d. When patient/resident feels bed or chair touching the back of the legs, have the patient/resident reach for the arm of the chair or mattress of bed and lower self into chair or bed. (Use gait belt to assist as needed).
13. Remove gait belt if used.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

**MANUAL SKILLS: Assists to Ambulate Using Transfer Belt**

**EQUIPMENT:**

Transfer belt

**BEGINNING STEPS:**

1. Gather equipment
2. Wash hands
3. Knock and pause before entering the patient's/resident's room
4. Introduce self
5. Identify patient/resident
6. Explain procedure speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible

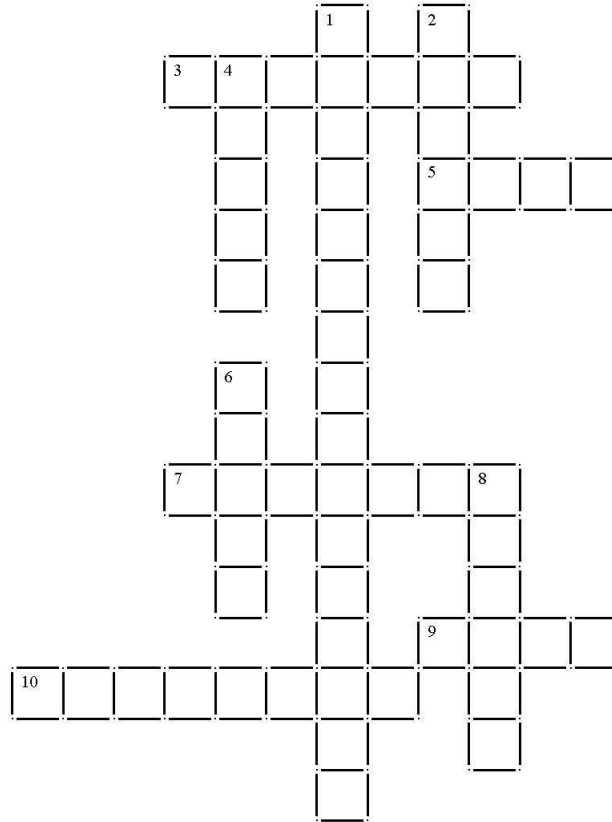
**SKILL STEPS:**

1. Before assisting to stand.
  - a. Nurse Assistant ensures patient/resident is wearing shoes
  - b. Bed is at a safe level
  - c. Checks and/or locks bed wheels
  - d. Patient/resident is assisted to sitting position with feet flat on the floor
  - e. Applies transfer belt securely at the waist over clothing/gown
  - f. Provides instructions to enable patient/resident to assist in standing including prearranged signal to alert patient/resident to begin standing
2. Stands facing patient/resident positioning self to ensure safety of Nurse Assistant and patient/resident during transfer. Counts to three (or says other prearranged signal) to alert patient/resident to begin standing.
3. On signal, gradually assists patient/resident to stand by grasping transfer belt on both sides with an upward grasp (Nurse Assistant's hands are in upward position), and maintaining stability of patient's/resident's legs.
4. Walks slightly behind and to one side of patient/resident for a distance of 10 (ten) feet, while holding onto the belt.
5. After ambulation, assists patient/resident to bed and removes transfer belt.

**ENDING STEPS:**

1. Clean and return equipment and supplies, if applicable
2. Remove gloves (without contaminating self) into waste container and wash hands
3. Position patient/resident comfortably
4. Place call light within reach
5. Lower bed to safe position for the patient/resident
6. Leave room neat
7. Wash hands
8. Document
9. Report abnormal findings to licensed nurse

## Body Mechanics Crossword



### ACROSS

- 3 A side-laying position
- 5 A belt used to help residents walk.
- 7 A semi-sitting position.
- 9 A side-laying position in which the upper leg is sharply flexed and the lower arm is behind.
- 10 Walk.

### DOWN

- 1 A piece of equipment used to transfer residents.
- 2 The resident sits on the side of the bed.
- 4 The way body parts are arranged.
- 6 A resident is positioned on the abdomen with the head turned to one side.
- 8 The resident is positioned on the back.

## Body Mechanics Crossword

