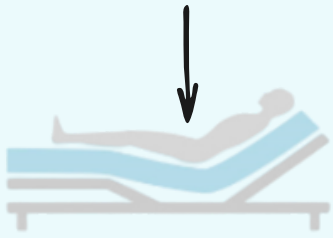


4 STEPS

FOR APPROPRIATE POSITIONING WHEN SITTING IN BED



1. Move the person up in bed:

to match the hips with the bending point of bed or higher

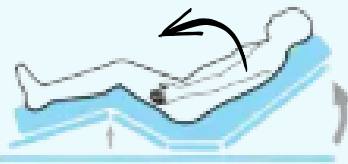


2. Raise the foot/knee section of the bed:

to prevent sliding down the bed, transfer pressure from sacrum to back of thighs, decrease pressure on heels



3. Raise the head of the bed



4. Trunk Release:

Bring the trunk of the person forward to clear mattress surface to decrease pressure & shearing at sacrum and release friction between the back and the support surface

Best practice is to avoid sitting up with head of bed elevated > 30 degrees unless eating (if medically able).



Reference: <https://www.clwk.ca/sitting-up-in-bed/> (video)

TRUNK RELEASE MANEUVER (TRM)

USE WHEN	KEY POINTS
<p>Care plans require the *patient to remain in bed, sitting upright.</p> <p style="padding-left: 40px;">Patient cannot assist to sit up or reposition them self in bed.</p>	<p>Preferable to have two caregivers.</p> <p>TRM cannot be used with a patient who has had a recent hip replacement or rib fractures.</p>
EQUIPMENT REQUIRED	KEY POINTS
<p>Repositioning slings (if already under patient) AND any one of: transfer belt, band sling, sliding sheet, or flat sheet.</p>	<p>Patients who require assistance to perform a trunk release will also require assistance with other repositioning and therefore should have a repositioning sling (if ceiling lift available) or low friction sliding sheet under them at all times.</p>
PREPARATION	KEY POINTS
<p>Explain the procedure to the patient and tell them what they can do to assist: lean forward and pull self up with bedrails, as able.</p> <p style="padding-left: 40px;">Put bedrails up and ensure bed brakes are locked.</p> <p style="padding-left: 40px;">To position the patient/client/resident in a high-sitting position, raise the foot of the bed first and then the head of the bed, to the intended position.</p> <p>If the patient is on a repositioning sling, walk from one side of the bed around to the other to feed the transfer belt/band sling/sliding sheet or flat sheet through the end loops of the repositioning sling straps positioned behind the patient’s upper back and shoulders.</p>	<p>Communication increases cooperation.</p> <p>Even if patient is only able to assist minimally, having the bedrails up may allow them to participate and reduce the force required by the caregiver.</p>
PROCEDURE	KEY POINTS
<p>Stand at the foot of the bed, facing the patient/client/resident.</p> <p>Grasping both ends of the transfer belt/band sling/sliding sheet or flat sheet with the hands in a neutral or “palm-up” grasp, use a weight shift (from front leg to back leg) to pull the patient forward in bed, releasing their trunk from the mattress.</p> <p style="padding-left: 40px;">Make the patient comfortable and adjust the bedrails as needed.</p>	<p>Using a neutral or palm-up grasp encourages the caregiver to keep their elbows tucked in, protecting the shoulders.</p> <p>Weight shift ensures that thigh muscles are used, rather than the upper body or back.</p> <p>If the head of the bed is raised again after the trunk release has been completed, this procedure must be repeated to ensure reduction in shearing forces against the patient/client/resident.</p>
<p>* The term patient may be applied to a patient, client, or resident depending on context used.</p>	

Appropriate Positioning When Sitting in Bed

1. Move person up the bed to match the hips with the bending point of bed

2. Raise the foot of the bed to prevent sliding down the bed, transfer pressure from sacrum to back of thighs, decrease pressure on heels

3. Raise the head of the bed

4. Trunk Release

Bring the trunk of the person forward to clear mattress surface to decrease pressure & shearing at sacrum

Best practice is to avoid sitting up with head of bed elevated > 30 degrees (if medically able).