

Protect Your Back With Expert Lifting Strategies

How nurses can prevent musculoskeletal injuries

BY CAROL JAKUCS, RN, BSN, PHN

It can happen to any nurse: While helping a patient into or out of bed, you make one wrong move and feel a nasty twinge. If you're lucky, it might be a simple muscle strain. If not, you might have a herniated disc or worse.

Lifting patients is an inevitable part of being a nurse. It's most common in hospital settings due to the higher acuity of the patients, but there are countless situations in which any nurse may have to lift a patient out of a chair, onto a bed or off the floor.

Even small patients can be heavy, especially if you're not that big yourself. Lifting a person is also more complicated than picking up a heavy object like a TV.

If you're not careful, you can easily injure your back, neck or shoulders — even if you don't notice right away. "With some injuries, nurses may not feel the full impact until several years later," says Rose Pelican, RN, director of education at Providence St. John's Health Center in Santa Monica.

Such injuries are very common in nursing. In fact, more than 12 percent of nurses end up leaving the clinical workforce because of back injuries. The good news is that by using proper training and techniques, you can greatly reduce your chances of lifting-related injury.

Lifting Law

Since 2012, California law has required each general acute care hospital (except for correctional facilities and certain separately licensed units) to maintain a safe patient handling policy.

As part of that policy, hospitals must designate "lift teams" or other trained staff that nurses can call on for assistance when moving or lifting patients. Facilities must also provide training in safely lifting or moving patients, including annual refreshers and supplemental training in any new lifting-related equipment or procedures.

Where appropriate, hospitals are also expected to provide powered patient transfer devices like friction-reducing repositioning sheets, mechanized inflatable transfer mattresses and mobile lifting devices. However, the law doesn't weigh in on exactly what or how much equipment each patient care unit must have.

What if the lift team is busy or the devices aren't available? Your facility's safe patient handling policy is supposed to cover this type of situation, but if for any reason you're still not sure, don't be afraid to wait if you don't think you can safely move the patient yourself. Hospitals are prohibited from disciplining healthcare workers who refuse to lift or move patients due to safety concerns.

Also, don't be afraid to speak up if you think the standard lifting procedures aren't right for a particular patient or situation. The law recognizes the RN as the "coordinator of care" when it comes to deciding how best to handle or move each patient.

Lifting Right

Even with the latest mechanized lifting gadgets and the help of coworkers, it's very important to follow the right techniques. The equipment can help, but if you don't position yourself properly, you can still get hurt.

"Consistent use of proper body mechanics when moving patients is of the utmost importance," says Troy Davis, DPT, co-owner of Davis & DeRosa Physical Therapy in El Segundo. He offers several strategies for minimizing your risk of injury while lifting and moving patients:



Lifting as a team

- For all transfers and lifts, lift as a team. Your facility's safe patient handling policy should provide guidelines for determining how many lifters you need (and any recommended equipment) based on the patient's weight and other factors.
- All lifters should unite and count "1, 2, 3," so they all lift at the same time.

Repositioning patients while they're in bed

- The closer you are to the patient, the better. You don't want to reach out with your arms; lifting with outstretched arms places more strain on your back and neck.
- Take a tip from physical therapists: Place one knee on the bed to position your body closer to the patient and help protect your own back.

Lifting patients with a repositioning sheet

- Place the patient on their side.
- Slide the repo sheet under them and attach the harness per the manufacturer's instructions.
- Stand close to the machine with your spine in a natural position and your head up.

Assisting patients from supine to sitting position

- Have the patient roll over to one side while they lie in bed.
- Have them place their knees off to the side of the bed while you simultaneously guide their trunk to the sitting position.

Helping a patient go from a sitting position on the bed to a chair or bedside commode

- Start by facing the patient.
- Engage your core (i.e., your abdominal, lower back and lat muscles), which helps to support your back.
- Keep your head up and your trunk tall to reduce the pressure on your spinal discs.
- Keep your knees bent as you stand in front of the patient. Flex at the knees and hips.
- Depending on the patient's height, you may need to squat a little bit.
- Pivot with the patient. Move your feet and body synchronously; don't turn your trunk alone.

Guiding a patient with a walker

- Stand off to the patient's side and slightly at an angle with your hips towards the patient.
- Keep one arm around the patient's waist.
- Remember to stay close to the patient, engage your core and stand tall.

Strengthening and Stretching Throughout the Day

You can also reduce your risk of lifting-related injury by maintaining a flexible, strong and healthy back. Davis offers three simple techniques that you can practice discreetly throughout the day to help you stretch and strengthen:

Core muscle strength

Gently draw in your abdominal and pelvic muscles towards your spine. You should be able to speak and function comfortably while doing this. This can be done anytime you think about it. Practicing this maneuver will help build muscle memory so that when you need to engage your core for lifting, those muscles will be more inclined to assist you.

Back stretch

Support your lumbar area with both of your hands gently pressed behind your back, palms facing outward. Stand up straight and gently extend and stretch your back towards your hands. This helps to keep your discs lubricated, which can also help to prevent back injuries.

Other Healthy Back Tips

In addition to practicing good body mechanics when lifting and moving patients, your back can also benefit from healthy lifestyle habits:

- Maintain an appropriate weight for your height to reduce extra strain on your spine.
- Don't smoke. In addition to the other damage it causes, smoking is believed to restrict blood flow to the spine.
- Take the time to stay fit. This will help you build strong core and other muscles and improve flexibility, balance and circulation.
- For additional recommendations specific to your body and work, it's always a good idea to consult your personal physician, a physical therapist or the occupational health unit at your hospital.

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MORE EXPERT ADVICE

We asked Stephanie Kaplan, PT, DPT, ATP, director of rehabilitation at Casa Colina Hospital and Centers for Healthcare, for her advice on how RNs can avoid injury when moving patients. Here are her suggestions:

USE THE EQUIPMENT!

Many staff prefer to manually lift patients when it may be safer to use a lift device. In the moment, it may indeed be faster to perform the manual task, but healthcare providers should opt for assistive devices when they are available. Lift teams also need to be careful to use mechanical and/or powered lifting devices. Assistive devices in which patients can still be active and assist with the mobility task may be preferable to those that are passive.

HANDS OFF

I advise staff to not allow patients to place their hands on the healthcare provider during a mobility task. Patients are often nervous and fearful during these transition movements, with a natural reaction to grab on to whatever they are holding. Often, that is a provider's neck, back or arms. Patients can easily be directed to instead hold onto the armrest of a chair, a bedrail or some other sturdy object.

REMEMBER TO REASSESS

It is important to remember that patients' abilities (both physical and cognitive) change over the course of a day. Staff need to continually assess a patient's abilities in order to select the appropriate device, lifting technique and/or number of staff to safely perform each mobility task.

USE GRAVITY TO YOUR ADVANTAGE

When moving patients from one surface to another or in a bed, take care to maximize the assistance provided by gravity. For example, if you are trying to scoot someone up in bed, adjust the bed with the head down if possible — and at a height that is ergonomically advantageous to you.

DEALING WITH FALLS

If a patient is on the floor following a fall, it is essential that a full assessment of the patient be completed prior to moving them. If it is safe to move them, consider using a mechanical lift to return them to their bed or chair instead of manually performing this task.