


Emergency Medical Responder

LIFTING AND MOVING PATIENTS




Body Mechanics

The safest and most efficient method of using your body to gain a mechanical advantage.

- 1) Use your legs to lift, not your back
- 2) Keep the object's weight as close to your body as possible
- 3) Stack shoulders above hips, and hips above feet
- 4) Reduce height or distance you need to move object

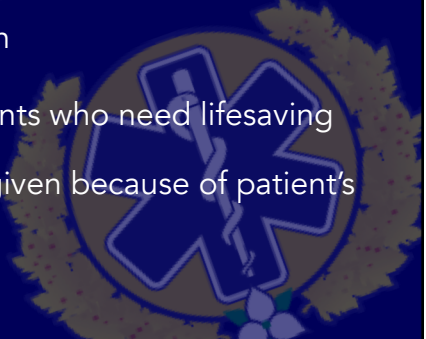


Emergency Moves

Make an emergency move only when there is an immediate danger to the patient.

- 1) Fire or threat of fire
- 2) Explosion or threat of explosion
- 3) Inability to protect patient
- 4) Inability to gain access to patients who need lifesaving care
- 5) When lifesaving care can't be given because of patient's location or position





Shirt Drag Technique



Figure 6-7 Shirt drag.



Blanket Drag



Figure 6-8 Blanket drag.



Shoulder Drag



Figure 6-9 Shoulder drag.



Non-Emergency Moves

- usually performed with other rescuers
- Direct Ground Lift
- Extremity Lift





One Rescuer Techniques

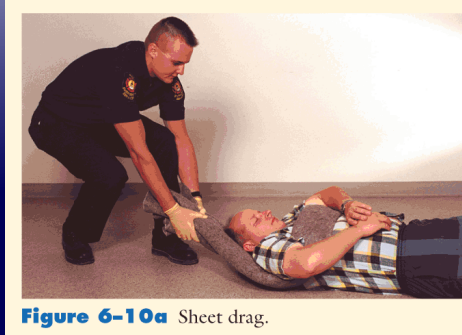


Figure 6-10a Sheet drag.

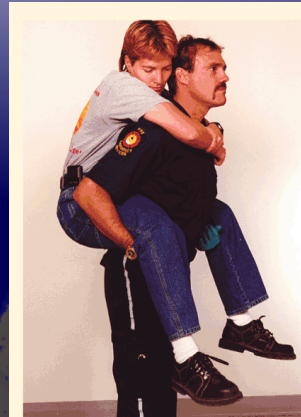


Figure 6-10b Piggyback carry.



Figure 6-10c One-rescuer crutch.

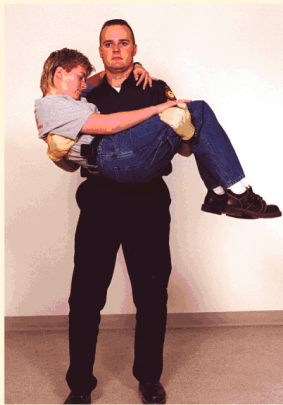


Figure 6-10d Cradle carry.

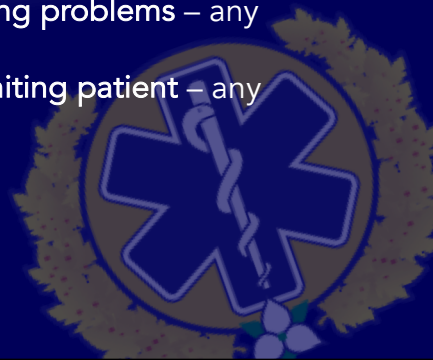


Figure 6-10e Firefighter's drag.



Positioning the Patient

- 1) Unconscious patient – not injured – recovery position
- 2) Non-life threatening emergency – do not move
- 3) Patient showing signs of shock – place in shock position
- 4) Patient in pain or with breathing problems – any position of comfort
- 5) Conscious, nauseated, or vomiting patient – any position of comfort



Stretchers



Figure 6-15 Standard stretcher.
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Figure 6-18 Portable ambulance stretcher.
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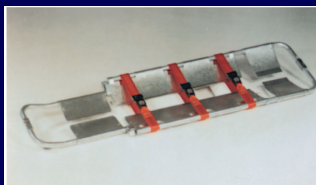


Figure 6-19 Scoop, or orthopedic, stretcher.
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Figure 6-21a Stair chair.
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Spinal Boards

The long spineboard or full body splint is also a common piece of equipment. You will become very familiar with it when you practice immobilization techniques.



Figure 6-26 Long backboard with straps and head blocks.

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