

Chapter 14 Body Mechanics, 15 Moving the Person & 16 Transferring the Person Study Guide

Why is it important for a C.N.A. to use their body in a careful way when they are at work? What is the term for being careful and efficient with your body?

What are some warning signs that you may be developing a work-related musculo-skeletal disorder? Why is it important to report any pain or injury to your workplace as soon as you notice it?

OSHA has identified some risk factors for musculo-skeletal disorders. The book discusses four of them- **force, repeating action, awkward posture, heavy lifting.**

For each of the four, think of something you may be asked to do at clinical that if done incorrectly could cause pain or injury. What would be a safer way to do each of these actions?

You're told to pick up something that is very heavy. If you're using good body mechanics, what are some things you should do?

C.N.A.s also have to be aware of patient comfort when moving a patient. What should you do to safely reposition a person?

Residents have to be repositioned in bed **every 2 hours.** Why is repositioning important for their health?

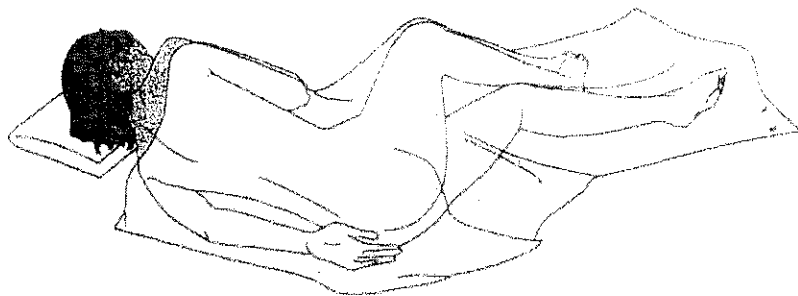
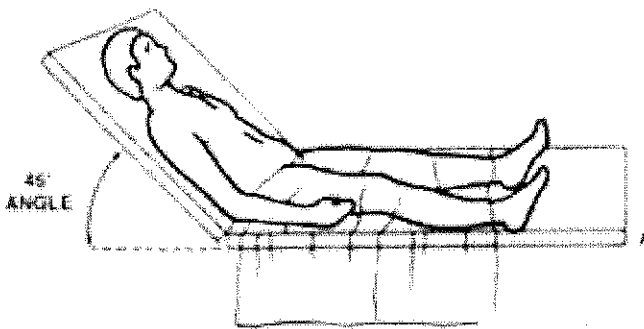
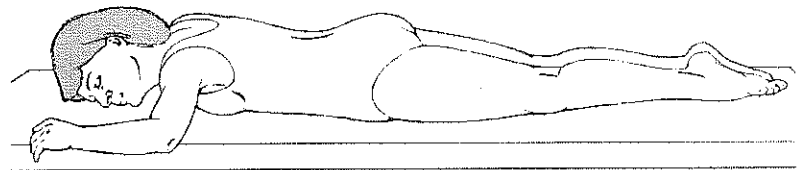
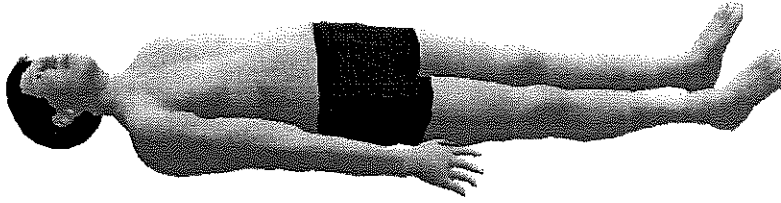
Most residents will also need some help getting seated in a chair, but some residents aren't able to sit in a chair. Why wouldn't a resident be able to sit in a chair?

What are the three elements of good body alignment when someone is seated in a chair?

Some residents need help sitting up in a chair and use postural supports when sitting. How does a postural support help the resident maintain good body alignment when sitting?

What level will you set the bed at to reduce the amount you have to bend and reach when you have to give a bed bath to a resident?

For each of the following pictures, write the name of the position and draw arrows to where you would put pillows to ensure patient comfort.



What is the difference between the **lateral position** and the **Sim's position**? Do pillows go in the same places for each one?

What is another name for the **dorsal recumbent** position?

Explain how **friction** and **shearing** can negatively affect a patient's quality of life.

What are three things you have to consider before you begin to move a person?

Why might it be necessary to give someone with dementia a soft object to hold when you need to transfer or move them?

You have to move a person up in their bed. What should you do during the Pre-Procedure step to promote good body mechanics for yourself when you move them?

Why would **Fowler's position** cause more **shearing** than any other position?

Why is it important to **always** explain to the patient what you are doing when you move them?

In what instances would you want to use an assist device when moving a person to the side of the bed? How does an assist device help promote their comfort?

In what order do you move a person's body when you move them to the side of the bed in segments?

When would you use **logrolling** to turn a patient? How can you make sure a patient is safe and comfortable during logrolling?

Why may patients need to be "**dangled**"?

How can you ensure patient safety when transferring a person?

When is it okay to use a **stand and pivot transfer**?

Why must you insist that the person does not put their arms around your neck when you transfer them? What should you do if you cannot use a transfer belt or mechanical lift?

Why is it important that a person gets out of bed on their **strong side** and that their strong side always moves first?

Know where to place a wheelchair for transfers to and from bed in regards to a resident's strong side.

What things must you check before using a mechanical lift? How many staff **must** be present to operate it?

Using the bathroom when you are in a wheelchair can involve a lot of things we don't always think about every day. Why are transfers from a wheelchair to a toilet so difficult? What do you need to do before and after a person finishes eliminating?

When do you need to put **non-skid footwear** on a resident before a transfer?

What should you do if a resident is concerned about their sheets getting dirty from wearing non-skid footwear in bed?