PURPOSE:
To prevent contractures, deformities and pressure ulcers.

CONSIDERATIONS:
1. The patient and caregiver should be instructed in proper technique for positioning and support for all parts of the body.
2. Turn the patient frequently at a minimum of every 1 to 2 hours. Patient should lie on alternating sides and on the abdomen at various intervals during the day.
3. Always consider postural alignment, distribution of weight, stability, comfort and pressure relief when positioning a patient.
4. Encourage frequent skin inspection and proper care for the prevention of decubiti.
5. Support weak extremities with pillows after turning or transferring the patient.
6. Prior to making position changes, check the patient’s chart for positioning precautions.
7. Distribute weight evenly to avoid pressure on bony prominences.

EQUIPMENT:
Firm bed or firm chair with high back and arm rests
Several firm pillows (both large and small)
Bath towel or small sheet blanket for towel roll
Wash cloth and rubber band or tape for hand roll
Foot board (cardboard box or pillows may be substituted)

PROCEDURE:
1. Adhere to Standard Precautions.
2. Explain the procedure to patient.
3. To position the patient on his/her back:
   a. Place flat pillow under the patient’s head.
   b. Place a towel roll along the thigh, from above the hip to below the knee, to correct external rotation of the hip.
   c. Support feet in a dorsiflexed position to prevent foot drop. Loosen the top sheet so that pressure is removed from the toes.
   d. Be sure the patient’s heels are off of the mattress with either heel protectors or a flat pillow placed under both calves.
   e. Place the upper extremity on a moderate size pillow at side and position the fingers around the hand roll to raise the wrist slightly.
   f. A small pillow may be placed under the knees to prevent back strain unless contraindicated.
4. To position the patient on his/her abdomen:
   a. Place a flat pillow under the abdomen to flatten the back. The exact positioning may be adjusted for the patient’s comfort; i.e., under the lower rib cage for large-breasted females.
   b. Place a pillow or towel under the ankles to relieve tension behind the knees and to prevent pressure on the toes, or the patient may slide down to allow the toes to fit over the edge of the mattress.
   c. Place one arm down by the patient’s side and the other bent by the patient’s head. The position of the arms may be varied depending on the patient’s shoulder range of motion and comfort.
5. To position the patient on his/her side:
   a. Place a small pillow under the head. Keep the head in alignment with the spine.
   b. Turn the patient on his/her side and place a pillow between the legs. The top leg should be flexed at the knee and well supported on the pillow.
   c. Rest the top arm on a pillow at the same height as the shoulder joint with the elbow slightly bent.
   d. Place rolled pillows at the back and/or chest for support.
6. To position the patient in a chair, try to maintain the 90/90/90 position:
   a. Place arm rests or pillow supports under the arms, if needed. This is especially important for a weak upper extremity.
   b. Place the patient’s feet flat on the floor or on the foot rests of the wheelchair.
   c. Place a small pillow at the patient’s back for comfort.

AFTER CARE:
1. Document in patient’s record:
   a. Positioning done; i.e., patient positioned on right side.
   b. Observations of patient.
2. Report any changes in the patient’s condition to supervisor.

REFERENCES: