

SAFE PATIENT HANDLING

Stroke can affect a person's ability to move and position their body, placing them at risk for falls and injury.



~30% of all stroke survivors will experience pain and altered tone; shoulder/ arm pain being most common



~40% of all stroke survivors will fall within the first year

⚠️ PREVENTION IS KEY



PROPER POSITIONING CAN:

- Prevent or treat spasticity/contractures
- Prevent/improve pain
- Prevent skin breakdown
- Improve comfort
- Improve independence



SAFE PATIENT HANDLING CAN:

- Prevent falls
- Prevent injuries (especially shoulder subluxation/dislocation)
- Improve independence
- Encourage safe, active participation

HOW CAN I HELP?

DO

- Assess fall risk/ implement prevention measures
- Know your patient! Consider fatigue, sensation, weakness, tone, balance, vision and language
- Follow recommendations - most will transfer to their strong side
- Use prescribed equipment/appropriate footwear
- Set up environment
- Use simple instructions/demonstrate action
- Encourage survivor to participate

DON'T

- Pull on the affected arm or transfer lifting from under affected arm
- Rush; take time to prepare
- Leave sling on (use for transitions/transfers only)
- Force movement; slow, gentle movement is recommended

USE GOOD BODY MECHANICS, **KNOW YOUR LIMITS**, ASK FOR HELP!



IF YOU HAVE QUESTIONS OR CONCERNS REGARDING SAFE HANDLING OF YOUR PATIENT PLEASE SPEAK WITH THE OCCUPATIONAL THERAPIST OR PHYSIOTHERAPIST.