

#### Chapter 8

# Body Mechanics and Patient Mobility

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#### Lesson 8.1

- 1. State the principles of body mechanics.
- 2. Explain the rationale for use of appropriate body mechanics.
- Discuss considerations related to mobility for older adults.
- 4. Discuss the complications of immobility.
- Demonstrate the use of assistive devices for proper positioning.
- 6. State the nursing interventions used to prevent complications of immobility.

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### **Body Mechanics**

- Area of physiology that studies muscle action and how muscles function in maintaining the posture of the body and prevention of injury during activity
- Principles of body mechanics
  - > Maintain appropriate body alignment
  - > Maintain wide base of support
  - > Bend knees and hips
  - > Do not bend from waist

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# Rationale for Proper Body Mechanics

- Must be learned by nursing personnel to prevent injury
- Back injuries rank second in occupational injuries
- Using proper body mechanics
  - > Protects large muscle groups from injury
  - > Provides safety

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# **Body Mechanics and Patient Mobility**

- Evidence-based practice
  - > Safe-lift programs
  - > Application to nursing practice



# Life Span Considerations

- Mobility
  - > Skin fragile
  - > Support joints when moving in bed
  - > Lose flexibility and joint mobility
  - > Weakness
  - > Orthostatic hypotension
  - > Altered sensory perception

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# Mobility Versus Immobility

- Mobility
  - > Ability to move around freely
- Immobility
  - > Inability to move around freely



# **Assistive Devices**

- Pillows
- Foot boots
- Trochanter rolls
- Sandbags
- Trapeze bars



















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#### Complications of Immobility

- Muscle atrophy and asthenia (muscle weakness)
- Contractures
- Osteoporosis
- Constipation



• Pneumonia, pulmonary embolism

#### Lesson 8.2

- 7. Demonstrate placement of patient in various positions, such as Fowler's, supine (dorsal), Sims, side-lying, prone, dorsal recumbent, and lithotomy positions.
- 8. State the assessment for the patient's neurovascular status, including the phenomenon of compartment syndrome.
- Describe and demonstrate range-of-motion exercises and explain their purpose.
- 10. Identify complications caused by inactivity.

#### Lesson 8.2

(Slide 2 of 2)

- 11. Relate appropriate body mechanics to the techniques for turning, moving, and lifting the patient.
- 12. Discuss use of the continuous passive motion machines.
- 13. Discuss the nursing process and how it relates to patient mobility.



# Positioning (Slide 1 of 3)

- Dorsal lying flat on back
- Dorsal recumbent supine lying on back, head, and shoulder with extremities moderately flexed
- Fowler's head of bed is raised 45-60 degrees
- Semi-Fowler's head of bed raised 30 degrees

#### Positioning

(Slide 2 of 3)

- Orthopneic sitting up in bed at 90-degree angle or sometimes resting in forward tilt while supported by pillow on overbed table
- Sims' lying on side with knee and thigh drawn toward chest
- Prone lying face down in horizontal position

#### Positioning

(Slide 3 of 3)

- Knee-chest (genupectoral) kneels so weight of body is supported by knees and chest, abdomen raised, head turned to one side and arms flexed
- Lithotomy lying supine with hips and knees flexed, thighs abducted and rotated externally
- Trendelenburg's head is low, body and legs are on inclined plane
- Lateral

#### Neurovascular Assessment

- CSM
  - > Neurovascular function or circulation
  - > Movement
  - > Sensation
  - > LPN/LVNs check skin color, temperature, movement, sensation, pulses, capillary refill, and pain
- Compartment syndrome



# Range-of-Motion Exercises

- Movement of the body that involves the muscles and joints in natural directional movements
- Active performed by patient
- Passive performed by caregivers

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# Life Span Considerations (Older Adult)

- Inadequate calcium intake
- Fear of falling
- Depression
- Arthritic
- Chronic illness





# Moving the Patient

• Assist patient with moving

Assist with ambulation

• Using a lift



# Continuous Passive Motion Machines

- <u>Machine</u> that flexes and extends joints to passively mobilize them
- Prevents complications
  - > Joint contracture, atrophy of muscles, thromboembolism

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# **Nursing Process for Mobility**

- Assessment
  - > Foci of ROM, muscle strength, activity tolerance, gait, posture
  - > Observe for fatigue, muscle strength, ROM
  - > Assistance needed for transfers
- Patient problem statement
- Expected goals and planning
- Implementation
- Evaluation

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