

# ABBREVIATED



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## Management of the Deceased Bariatric/Obese Patient

- The article describes the introduction of a Deceased Bariatric/Obese Patient Pack, which includes guidelines for use, a single-patient use repositioning sling and a kimono gown to avoid having to put the patient in their nightwear.
- When the bariatric/obese patient dies, the problems related to transferring them to the mortuary and into the coffin intensifies.
- It is important to include this aspect of care into your bariatric protocols and safe patient handling program
- Identifies the challenges experienced by funeral directors when they collect the body and also when transferring the body into the coffin.

*Have you thought of targeting funeral directors as a potential purchaser of your lifts, slings and other transfer devices?*

## A Comprehensive Review of Patient Slings

- The article provides information on a variety of different types of slings that can be used with SPHM technology.
- The safety and potential incompatibility of clips, loops and hanger bars are discussed
- The advantages and disadvantages as well as the type of patients they are/are not suitable for are identified
- Clinicians must use the limited evidence available and their clinical judgment to decide whether to leave a supine sling under a patient. The type of fabric the sling is made from must be a consideration in this decision.
- Leaving a supine sling under a patient can encourage staff to move patients more and could lead to less injury to staff as they are placing the sling under the patient less often.
- It is preferable that all slings should be clearly labeled with their maximum load capacity, cleaning instructions, its intended use( method of lifting) , a symbol of the hanger bar the sling can be used with, a color code indicating size, a warning if it is not to be laundered (Single-patient use), if it unsuitable for a specific clinical condition (eg. hip replacement), contact details of the manufacturer, and a place to indicate date of first use.

## Decreasing Patient Falls and Increasing Communication Through the use of Patient Mobility Cards

- Survey of registered nurses (working on an orthopedic unit) confidence in mobilizing patients that they had not received report on and who were not part of their team.
- 6 different Mobility Cards were introduced to improve communication between the different disciplines of a patients mobility needs.
- Each Mobility Card covered 1 of 6 different mobility levels from bed rest to fully independent along with the interventions to reduce falls risk
- After the introduction of the Mobility Cards the registered nurses felt more confident in mobilizing other nurses patients
- The Mobility Cards can be reproduced, using a multi-disciplinary approach, to address the needs of different populations.

## Vendor Portal

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## International Round Table Discussion: Engaging Patients and Family in Safe Patient Handling and Early Mobility Decision-Making

- Participants from Canada, US and Australia took part
- Patients and their families are part of the safe patient handling team, but at this time they are not engaged enough.
- “For the patient the use of safe patient handling equipment always involves loss” With that loss comes grief which, if not managed, may become a barrier to a quality outcome for all.
- Without the full support of patients and their families, SPHM efforts are undermined.
- Patients and families need to be listened to, and understand the why of SPHM and the benefits to themselves, their care and recovery.
- Information can effectively be delivered at ‘the point of care’ whether that be in acute care, long term care, rehabilitation or home care, and can be reinforced with brochures and other forms of communication as appropriate.