







- h. *Stomach muscles tight*
  - i. *Don't jerk*
  - j. *Don't twist*
2. What type of patient(s) may have restrictions to movement?
    - a. *Head injury*
    - b. *Spinal injury*
    - c. *Recent post-op*
    - d. *Stroke*
    - e. *Shortness of breath*
  3. What can you ask the patient to do to assist you when moving them up in bed?
    - a. *Knees bent*
    - b. *Head up*
    - c. *Arms crossed*
    - d. *Push up with feet*
  4. What is the purpose of a draw sheet?      *Gives a team of health care providers the same thing to hold on to when moving patient. Supports entire trunk when lifting.*
  5. Why would an RCP place a patient in a chair or ambulate a patient? *RTs transport patients for pulmonary function testing in wheel chairs and ambulate patients with & without oxygen to assess their O2 needs.*
  6. Why might a patient become light-headed or nauseated when sitting up? *Orthostatic Hypotension*
  7. What is the purpose of a gait belt? *Gives health care provider something to hold on to when moving a patient*
  8. Why is it important that the patient NOT put their arms around your neck during movement? *To prevent a neck injury in case the patient begins to fall or becomes unstable.*
  9. How should you instruct the patient to focus their eyes and to breathe during movement? *Look straight ahead and breath slowly & deeply*
  10. Where should the RCP position them self during ambulation?      *One hand on patient's shoulder, one hand on gait belt standing to side and back of patient.*
  11. What should be done if the patient begins to fall when moving to a chair or ambulating? *Call for help, protect patient's head and ease them to the floor. If possible, set patient on your knee and call for help. Protect your back.*
  12. What clinical parameters should be monitored during patient movement (especially ambulation)?
    - a. *Subjective response of patient*
    - b. *Level of consciousness (LOC)*
    - c. *Stability*
    - d. *Work of breathing*
    - e. *Color*
    - f. *Sweating (diaphoresis)*
  13. What should be documented after ambulating a patient?      *Distance, tolerance, oxygen needs, pulse oximetry results, plan...*
  14. Who might you communicate with after ambulating a patient and why? *If adverse response, inform nurse, doctor and next therapist in report. If follow-up orders needed, contact doctor.*