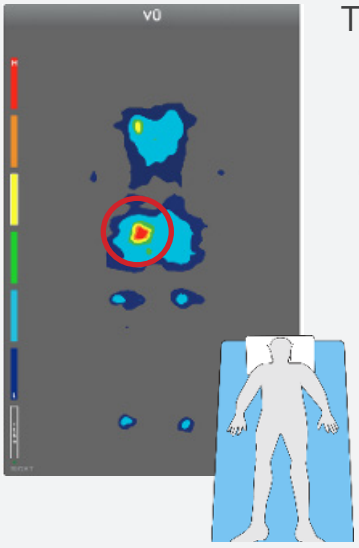
NPIAP[SM]
NATIONAL PRESSURE INJURY ADVISORY PANEL
Improving Patient Outcomes Through Education, Research and Public Policy

PROPER SUPINE POSITIONING IN ADULTS TO PREVENT PRESSURE INJURIES

BEFORE

TYPICAL POSITIONING

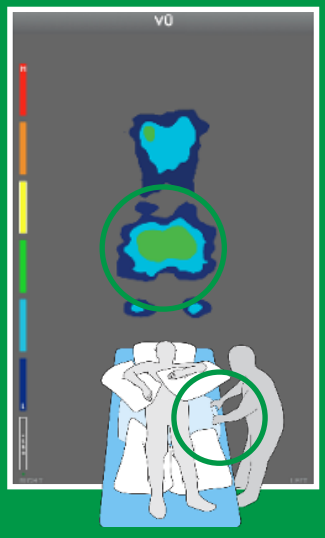


Turn patient to a supine position

5.1: Reposition all individuals with or at risk of pressure injuries on an individualized schedule, unless contraindicated. (Strength of Evidence=B1; Strength of Recommendation=↑↑)[1]

AFTER

CBPM[1] - GUIDED POSITIONING



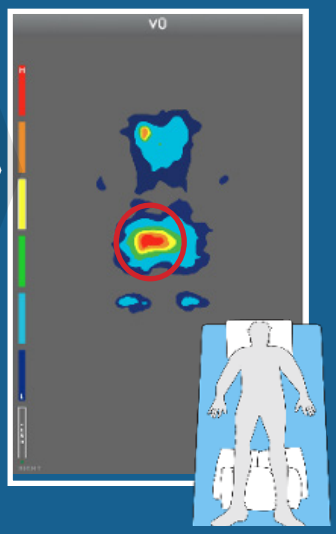
Use microshifts (small shifts) by lifting sheet/ underpad **slightly** (reducing friction/shear on the patient) to adjust patient. Microshifts help to reduce pressure to the hips & other body areas (e.g., shoulders, etc.) & allow further immersion into a support surface.

5.6: Reposition the individual to relieve or redistribute pressure using manual handling techniques and equipment that reduce friction and shear. (Strength of Evidence=B2; Strength of Recommendation=↑)[1]

5.7: Consider using continuous bedside pressure mapping as a visual cue to guide repositioning. (Strength of Evidence=C; Strength of Recommendation=↔)

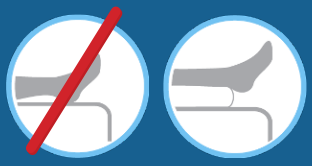
STEP-BY-STEP INTERVENTIONS

FOR BEST POSITIONING OUTCOMES, PERFORM THE FOLLOWING STEP SEQUENTIALLY.



Place pillows between knees & ankles and ensure heels are **offloaded** from the support surface.

(see Tip Sheet, Offloading Heels Effectively)



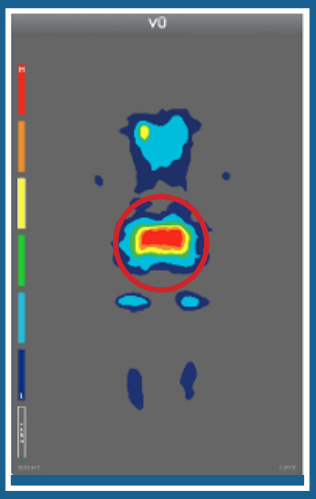
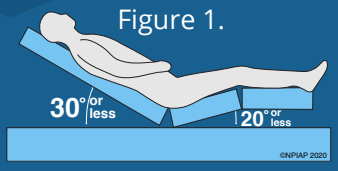


Figure 1.



First, elevate foot of bed to 20° (but no more than 30°) using bed controls or pillows *(knee-gatch position, above figure)*. Raising the knees, first, will stop patient from sliding (shearing) when the head of bed is raised.

Then, elevate the head of bed using bed controls or pillows to 30° ***or lower if clinically feasible.***

When elevating the head of bed, maintain elevations at 30° or lower to minimize soft tissue deformation. (Expert Opinion)[1]

RESULTS

HEEL PRESSURE REDUCED BY OFFLOADING HEELS
SACRUM PRESSURE REDUCED THROUGH MICROSHIFTS

*Continuous bedside pressure mapping Images courtesy of Wellsense/VU

[1]European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel, & Pan Pacific Pressure Injury Alliance. (2019). Repositioning and Mobilization. In E. Haesler (Ed.), Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline: The International Guideline 2019 (pp. 115–144). European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance.