


# Guideline Implementation: Positioning the Patient

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BYRON L. BURLINGAME, MS, BSN, RN, CNOR

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### Purpose/Goal

To provide the learner with knowledge specific to implementing AORN's "Guideline for positioning the patient."

### Objectives

1. Describe interventions to protect patients from positioning injuries.
2. Discuss the use of prophylactic dressings for protecting the patient's skin from damage.
3. Identify risks for injury associated with the prone position.
4. Identify risks for injury associated with the supine position.

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Byron L. Burlingame, MS, BSN, RN, CNOR, has no declared affiliation that could be perceived as posing a potential conflict of interest in the publication of this article.

The behavioral objectives for this program were created by Liz Cowperthwaite, BA, senior managing editor, and Helen Starbuck Pashley, MA, BSN, CNOR, clinical editor, with consultation from Susan Bakewell, MS, RN-BC, director, Perioperative Education. Ms Cowperthwaite, Ms Starbuck Pashley, and Ms Bakewell have no declared affiliations that could be perceived as posing potential conflicts of interest in the publication of this article.

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## ABSTRACT

Every surgical procedure requires positioning the patient; however, all surgical positions are associated with the potential for the patient to experience a positioning injury. The locations and types of potential injuries (eg, stretching, compression, pressure injury) depend on the position. Factors that may increase the patient's risk for an injury are the length of the procedure and risk factors inherent to the patient (eg, weight, age, frailty). AORN's updated "Guideline for positioning the patient" provides guidance on injury prevention practices for all surgical positions including supine, Trendelenburg, reverse Trendelenburg, lateral, lithotomy, prone, and sitting positions and modifications of these positions. This article focuses on the key points of the guideline covering the use of prophylactic dressings, neurophysiological monitoring, and safely positioning the patient in the supine and prone positions. Perioperative RNs should review the complete guideline for additional information and for guidance when writing and updating policies and procedures. *AORN J* 106 (September 2017) 227-237. © AORN, Inc, 2017. <http://dx.doi.org/10.1016/j.aorn.2017.07.010>

Key words: *positioning, pressure injury, prone, supine, reverse Trendelenburg.*

Every patient undergoing surgery is at risk for injury related to the position required for the surgical procedure. Injuries may be caused by stretching or compression of tissues that can lead to reduced blood flow and ischemia, by friction and shear forces, or by prolonged pressure that can lead to skin breakdown. Positioning injuries may cause major or minor damage, and the effects may be temporary or permanent.<sup>1</sup>

Positioning the patient correctly is important because, under the influences of general anesthesia, the patient cannot move and cannot feel pain generated from remaining in one position for a prolonged period of time. Even a patient who is under local anesthesia might not feel pain or might not be able to communicate where the pain sensation is located. Because of these limitations, the perioperative team must take measures to prevent causing positioning-related injury to the patient.

Patient positioning is a team effort involving the anesthesia professional, the RN circulator, the scrubbed personnel, and ancillary personnel who may be needed based on the size, condition (eg, inability to assist with movement), or intended position of the patient. Having an adequate number of personnel to position the patient helps maintain the patient's physiologic alignment, support the patient's extremities, and protect the team members from musculoskeletal injuries that can occur from exerting lifting, pushing, and pulling forces during positioning.<sup>2,3</sup> The position selected should

- provide exposure of the surgical site;
- maintain the patient's comfort and privacy;
- provide access to IV lines and monitoring equipment;
- allow for optimal ventilation;
- maintain circulation;

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