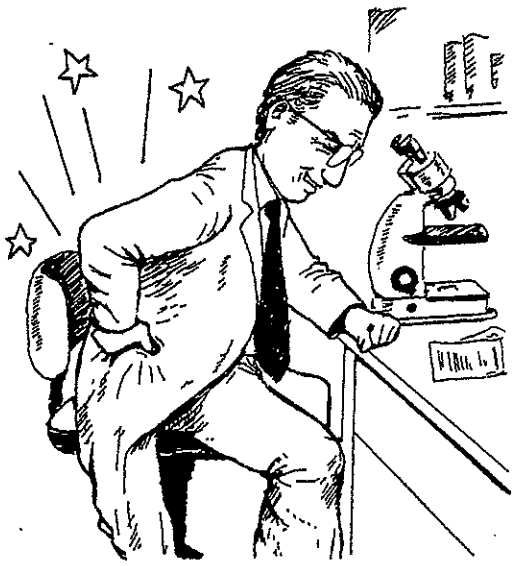
PROTECTING YOUR BACK

INTRODUCTION

Lower back pain is an occupational hazard for many healthcare workers. Even if your back feels fine right now, you may be straining it if you:

- Have poor posture
- Are out of shape or overweight
- Move your body incorrectly.

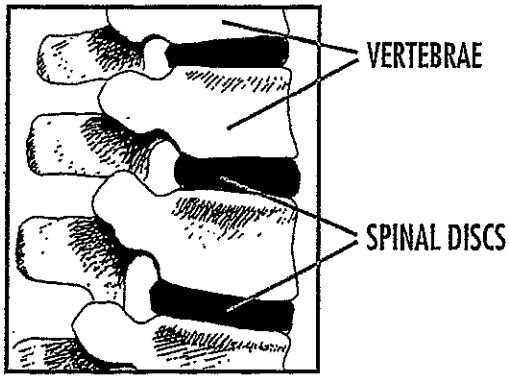


All these strains add up until one day a simple act like bending over can bring on sudden chronic back pain. Back injuries may be extremely painful and can cause long-lasting disability and loss of work. In short: back injuries hurt — you, your family and your job.

To know your spine is to respect it. This complex and hard-working structure will serve you well if you take good care of it.

Your spine consists of:

- 24 interlocking bones with flexible joints called vertebrae
- Shock-absorbing discs between each pair of vertebrae.



Other parts of your body can help your back stay healthy:

- The muscles of the abdomen, buttocks and hips help support the spine.
- The leg muscles can provide much of the power for lifting.
- Most important is the mind. If you plan ahead and use common sense, you'll make things as safe and easy for your back as possible.

SAFE LIFTING

To lift safely:

- Evaluate the load you want to lift. Is it light enough to carry or too heavy?
- Move one foot out in front of you in the direction you're moving.
- Keep both feet flat on the floor and slightly flex the knees.
- As you reach, bend slightly at the hips, holding the spine in neutral.
- To lift, move both feet closer to your load, bend at the hips and maintain the spine in neutral.
- Jerky movements risk back strain. Move smoothly.

MECHANICAL ASSISTIVE DEVICES

Although mechanical assistive devices vary by facility, some are found almost everywhere. You should learn to use any that are available where you work.

LIFTS

Sit-to-stand lifts are used when a patient must stand and then pivot. These are helpful for toileting patients who can bear some weight. Some can serve as walkers once the patient is standing. Others can transport patients. Total or vertical lift devices are used for patients who cannot bear weight or are immobilized. Some double as scales. Those that reach the floor assist in lifting patients who have fallen. Lateral transfer devices move patients laterally such as from stretcher to bed or x-ray table. Multipurpose lift devices can move acutely ill patients laterally from bed to device, transport them to another department, weigh them and become a comfortable chair for them.

FRICTION REDUCERS AND SLIDE BOARDS

Friction reducers are used to pull a patient up in bed or to transfer a patient from a gurney to a bed. Placed under the patient, these slide sheets or boards make movement easier by reducing resistance.

When using mechanical devices:

- Learn to use the devices correctly.
- Keep the devices readily accessible and in good repair.
- Inspect equipment before each use and report any that needs repair.

SITTING

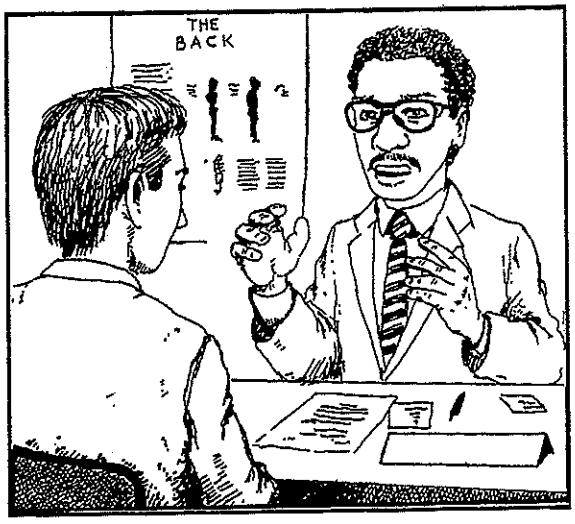
Sitting can be twice as hard on your back as standing. If you sit on the job:

- Get a chair that supports your lower back. Or use a lumbar cushion. Even a rolled towel placed between the chair and your lower back helps.
- Adjust your chair so your knees are at least as high as your hips when your feet are on the floor. Desktop should be slightly above your waist.
- Sit close to your work — don't lean over it.

EXERCISE

A healthy back is a fit back. Studies show that people in poor physical condition are most apt to injure their lower backs. Exercise also helps you reduce stress and lose weight, both of which can contribute to back trouble. Here are some tips:

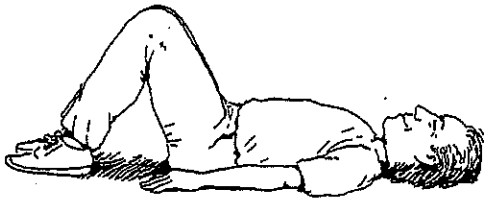
- Just 20 minutes of aerobic exercise, three times a week, is the backbone of a good fitness program.
- Warm up thoroughly before starting any vigorous exercise and cool down afterward.
- Maintain good posture throughout your workout.
- While performing each exercise, slowly breathe in through your nose and out through your mouth.
- Exercises that are easy on your back include brisk walking and swimming.
- If you have injured your back, start with the backstroke and sidestroke. Work up to swimming the crawl with a flotation device around your waist to minimize back strain.
- Check with your physician before starting an exercise program, especially if you have back problems.

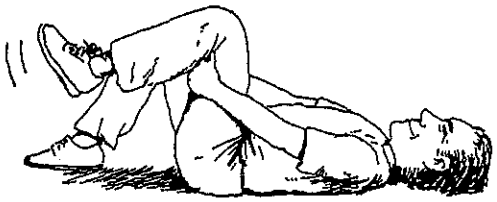


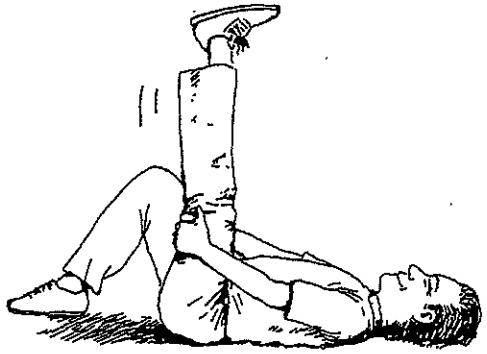
HAMSTRING STRETCH

To stretch those hamstrings:

- Lie on your back with your knees bent, and your feet flat on the floor.
- Bring your knee toward your chest and grasp your right thigh with both hands, close to your knee.
- Straighten your leg slowly and press your heel toward the ceiling.
- Slowly pull your toes back and then point them toward the ceiling. Repeat this three to five times.
- Return to your starting position. Switch legs.
- Repeat the sequence five times.



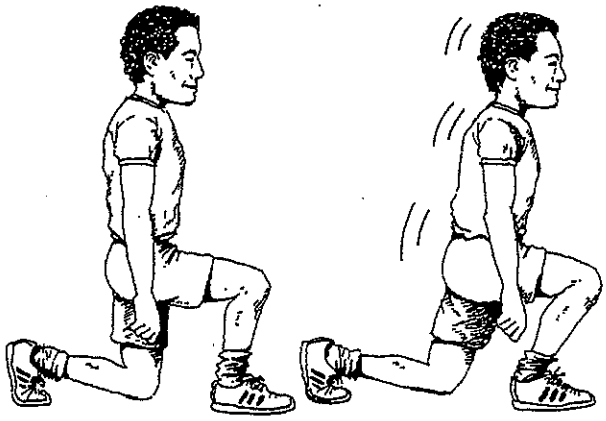




HIP STRETCH

To stretch hip muscles:

- Kneel between two chairs with one hand on each chair to support your upper body.
- Extend one leg forward with your knee and hip bent at 90-degree angles and your foot flat on the floor.
- Contract your stomach muscles and align your spine.
- Slowly press your hip forward to shift your weight from your back leg to your front foot. Hold 7 to 15 seconds. Shift your weight to your back leg again.
- To avoid bending forward at the waist, hold your head up and look straight ahead at all times.
- Switch legs. Repeat the sequence five times.



PATIENT TRANSFER

If you're a nurse, physical therapist, occupational therapist or other healthcare worker who provides direct patient care, you need to take a closer look at how body mechanics can help you protect your back when you transfer patients. After all, you lift loads as heavy as any construction worker. But the loads you lift are far more precious, flexible — and sometimes, uncooperative — than steel or concrete. Using good body mechanics will protect your back and your patients.

The first three rules of transferring patients are communicate, communicate and communicate! To transfer patients right, you've got to transfer information.

Make sure you:

- Read the patient's chart, consult with the doctor or nurse on the case, and use observation to determine the patient's condition and size as well as physical, hearing or visual limitations.
- If the patient can understand, ask the patient what she can do. Can she help pull herself up using a trapeze? Can she help herself up with her arms or legs? Don't assume a patient is helpless.
- To ease fears and gain cooperation, tell the patient what you are going to do.
- If you have an assistant, tell him what you want him to do.

MORE GUIDELINES

- Don't move a patient who is too large and unable to assist you. Get an assistant.
- Use a mechanical lifting device if one is available, if you are trained to use it and if it would be appropriate to the patient's condition.
- Moving a patient by yourself should be your last resort.

- Brace your knees against the patient's knees.
- Make sure the patient's feet are firmly planted beneath him and stabilize his feet with yours.
- Keep your knees and hips flexed; stay low.
- Get in close to the patient and hold onto the belt or grasp him under the arms.
- Explain to the patient what you're going to do.
- On signal, move the patient to a standing position by pulling on the transfer belt and straightening your knees.
- With the patient standing, pivot, taking little steps and staying close to the patient.
- Don't twist.
- Keep your knees slightly bent, your head up, back aligned and stomach muscles contracted.
- Lower the patient into the wheelchair by bending your knees.
- Patient may hold onto your waist or shoulders — not your neck.

If the patient is weak and cannot sit up:

- Raise the head of the bed with side rails up.
- When ready to make the transfer, reach under the patient's arms and grasp her forearms, while your assistant supports the patient's lower body by holding her legs below the knees.
- On signal, lift the patient by straightening up and sliding her into the seat.

SUMMARY

As you can see, the prescription for a healthy back is simple:

■ Posture
- When correctly aligned, the spine has three curves — in at your neck, out at your chest and in at your lower back.
- Be sure to practice good posture when standing or sitting.

■ Body Mechanics
- When lifting — keep loads close and bend your knees.
- When sitting — don't slump. Practice good posture and adjust your chair to suit your body.
- When standing — move work to a comfortable level, wear comfortable shoes and place one foot on an elevated surface.
- When bending or leaning — bend your knees and hips, not your back. Let your legs do the work.
- Push, don't pull whenever possible.
- When you must make repetitive motions, keep loads small, change positions frequently and avoid twisting your body.

■ Exercise
- Studies show that people in poor physical condition are most apt to injure their lower backs.
- 20 minutes of aerobic exercise three times a week is the backbone of a good fitness program.
- Do exercises that strengthen and stretch your back muscles.

■ Patient Transfer
- Always keep your feet wide apart and your knees bent.
- Stay low and shift your weight from foot to foot.
- Don't use just your arms.

You've got a challenging job — but it doesn't have to be back-breaking. It's up to you to take care of your patients — and your back!