



Prone Positioning Step-by-Step Guide:

2 Comfort Glide Sheets

Team Required:

1. There should be a minimum of 5 personnel available. 1 at the head of the bed and two at both the sides.
2. Assure that one staff member is responsible for managing the ET Tube, circuit, and ventilator.

Equipment Necessary:

1. Two Comfort Glide Sheets - The standard or XL sheets should be selected based off patient's body size and facility guidelines
2. Comfort Glide Dry Pad
3. Pressure reducing device to support the patient's head
4. Pillows/ Offloading devices
5. Recommended Dressings

Performing Prone Positioning

1. Raise the bed to hip level.
2. The head of bed should be flat and the patient's arms should be at their sides.
3. Remove the bed's headboard and lower the side rails.
4. Place a Comfort Glide Repositioning Sheet underneath the patient.
5. Place all lines inserted in the upper torso over the right or left shoulder, with the exception of chest tubes, which you should place at the foot of the bed. Position all lines inserted in the lower torso at the foot of the bed.
6. Apply hydrofiber/calcium alginate dressing under prophylactic dressing to manage excess moisture. Pad pressure points and bony prominences with foam dressings. Use liquid skin protectants/ sealant on face. Apply soft silicon multi-layered foam to pressure points on the face. Apply foam dressings under medical devices but avoid multiple layers of dressings that increase pressure.
7. Place the patient's hand on the rotating side under the buttock.
8. Cross the leg that is going toward the ventilator to facilitate turning.
9. Place a pillow measuring the width of the patient over the chest, pelvis, and knees (the amount of pillows used will depend on patient's size)
10. Take the second Comfort Glide Repositioning Sheet and Comfort Glide Dry Pad and place over the patient so it is even with the underlying sheet.
11. Have all staff members wrap the underlying sheet into the overlying sheet until the sheet is taut and all staff members have a secure hand hold.
12. While supine, pull the patient to the opposite side of the ventilator.
13. Upon the leads command, staff members will begin the prone positioning process by placing the patient on a lateral position towards the ventilator.



14. In the lateral position the receiving staff members will place hands at the top of the sheet.
15. The receiving staff members will lower the patient down towards them.
16. Once the patient is lowered. Remove the top sheet. Center the patient in bed. Gently move the tucked arm and hand to place them parallel to the body and flex until comfortable or place one arm up and one down (swimmers position).
17. Readjust all patient lines and tubing. Place ECG monitor leads on the patients back.
18. Place the patient's head in a facility directed prone head positioner.
19. Adjust the bed height and HOB elevation per facilities policy/procedure.
20. Document the procedure.

Considerations in Prone Positioning

1. Place the patient in swimmers position: one of the limbs should be raised to 80 degrees with the elbow flexed at 90 degrees and the face should be turned to the raised limb, while the other arm is at the body.
2. Alternate the swimmers position every 2 hours.
3. Place feet in the anatomically correct position, maintaining flexion by elevating shins on pillows or positioning feet off the end of the bed.
4. Refer to your hospital guidelines for further instruction.

References

1. Apply prophylactic foam dressings to pretibial and patella area. (Dr. Virginia Caspasso, 2020)
2. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel, and Pan Pacific Pressure Injury Advisory Panel, Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. Third ed. 2019: EPUAP-NPIAP-PPPIA. Available from: <https://guidelinesales.com/>
3. Marion BS. A turn for the better: prone positioning of patients with ARDS. *Am J Nurs.* 2001; 101(5):26-34; quiz 34-5.
4. Dirkes S, Dickinson S, Havey R, O'brien D. Prone positioning: is it safe and effective? *Crit Care Nurs Q.* 2012; 35(1):64-75.
5. Mitchell, D. A., & Seckel, M. A. (2018). Acute Respiratory Distress Syndrome and Prone Positioning. *AACN Advanced Critical Care*, 29, 415–425.

