



Guidelines for Journal and/or Textbook Reading

1. For journal reading, a minimum of two (2) peer-reviewed, practice-related professional journal articles (e.g. *The International Journal of SPHM*; *Ergonomics*; *Journal of the American Physical Therapy Association*) are equivalent to one (1) PDH.
2. For textbook reading, a minimum of two (2) chapters are equivalent to one (1) PDH.
3. All readings **must** be specific to Safe Patient Handling and Mobility (SPHM).
4. Verification documentation **must** include the following:
 - Date(s) the articles/chapters were read by applicant or certificant.
 - Annotated bibliography listing the APA reference of each reading along with a brief description of the content, validity of the research or ideas presented, and the conclusions drawn by the author(s) of the readings.
 - Description of how the content of the readings have impacted your current area of practice.

Date Read	Reference	Annotated Bibliography	Describe How This Article Has Impacted Your Practice Area
05/06/2016	Marras, W.S., Knapik, G.G., & Ferguson, S. (2009). Lumbar spine forces during manoeuvring of ceiling-based and floor-based patient transfer devices. <i>Ergonomics</i> . 52(3): 384-397.	The article describes a research study that investigates the differences between the forces on the lumbar spine using a floor-based lift as opposed to a ceiling lift. The authors evaluated pushing and pulling tasks using the two types of devices, testing 10 subjects (5 males/5 females) of varying weights. With the floor-based systems, wheel-size and floor type significantly influenced the results of A/P shear, as did turning maneuvers. Results indicated that while floor-based lifts provide much greater benefit than manual patient handling, ceiling lifts have little spine loading risk associated with their use. Therefore, ceiling lifts are preferable to floor-based lifts.	I work as a therapist in an acute care hospital. I also sit on our hospital's Safe Patient Handling Committee. Many of the patients I work with come in severely deconditioned and need a lot of assistance to get back to their baseline. As our facility has begun to renovate some of the nursing units and break ground for a new building, I have advocated for the installation of more ceiling lifts, as they provide a preferable and much safer alternative to mobilize patients (e.g. transfers, turning and repositioning, boosting, gait training). While floor-based lifts serve their purpose in certain scenarios, I feel that having access to more ceiling lifts will reduce the amount of manual patient handling and ultimately decrease the amount of patient handling injuries we incur. As a therapist, I also feel that the use of ceiling lifts can help support my early mobility initiative.

Signature: _____

Date: _____