

❖ Transfer with Maximum Assistance of Two Persons

Some patients require the assistance of two persons to transfer between surfaces. This may be due to the patient's size, to medical conditions that may interfere, or to tightness or contractures that may have developed. The following method is a very safe way to transfer a patient requiring the assistance of two persons. It is safe for the patient, prevents trauma to the shoulders and is safe for staff members, dramatically reducing back injuries.

The responsibility of the therapist in front is to shift (not lift!) the patient's base of support from the chair to their feet. The responsibility of the person in back is to pivot the patient from the chair to the bed. Neither person is lifting the patient.

Starting Position

Patient is sitting in the wheelchair. One person is standing in front, toward the side the patient is transferring. The second person is standing behind the patient and next to the bed. Sometimes it is helpful to have one knee up on the bed. Be careful of your back and use good body mechanics.

Handling

1. Stand in front of the patient.
2. Remove the patient's foot from the footrest and place both feet flat on the floor.
3. With your knees together, position yourself in front of the patient's weak side.
4. Your feet should be staggered, one in front and one in back. This way you'll be able to shift your weight from your front foot to your back foot as the patient shifts weight from the hips to the feet. Your back foot should be on the weak side, toward the bed.
5. The "V" space between your knees will be positioned on each side of the patella at the condyles. This correct position is extremely important and plays a key role in the method working. Your point of contact should not be on the patella nor should it be up on along the femur. These are very common mistakes and should be avoided.
6. Help the patient to lean forward.
7. Reach over the patient's back and place your hands securely along the scapula and onto the rib cage. Do not grab under the patients arms, as this can cause injury to the patient's shoulders.
8. Do not lift the patient into standing. Instead, rock their weight forward from their hips onto their feet. At the same time, rock your weight onto your back foot.
9. Approximate the knees by giving input with your legs into their condyles, just on each side of their patella. The force of your input should help bring their hips up and off the surface of the chair. The larger the patient, the more approximation you will need to give and the further your hands will come around the rib cage.
10. As their hips clear, the second therapist will now prepare to help pivot the patient's hips to the bed.
11. Position yourself to protect your back. You'll be behind the patient and next to the bed. Sometimes it is helpful to have one knee up on the bed.
12. Place your hands firmly on the pelvis.
13. Pivot the patient's hips onto the bed.

**⌘10 Pause and Practice
with Two Partners**