

All Positions

Patient Positioning Best-Practices

Quick Reference Guide

AORN Guidelines Recommend:

1. Place the head in a neutral position
2. Position Arms:
 - a. On padded arm boards, flexed 90° or less
 - b. Tucked at the side, with the palms facing the patient's body, and draw sheet tucked under the patient (not the mattress)
 - c. Elbows must be supported to prevent hyperextension and/or flexion at 90° or less
 - d. Level the arm board pads with the OR Mattress
3. Apply safety straps in a manner that safely secures the patient
4. Pad bony prominences to reduce pressure



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Supine Position



AORN Guidelines Recommend:

1. Place a safety strap approximately 2 inches (5 cms) above the knees
2. Flex the patient's knees approximately 5° to 10°
3. Position the patient's legs parallel to one another, with the ankles uncrossed
4. DO NOT hyperextend or hyperflex the feet
5. Elevate the patient's heels off of the underlying surface

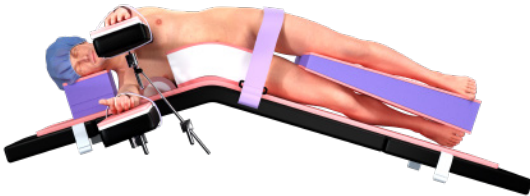
Trendelenburg Position



AORN Guidelines Recommend:

1. Secure the patient's arms by:
 - a. Tucking them at the sides with a draw sheet, and/or
 - b. Securing them at the sides with arm guards
2. Prevent the patient from sliding by:
 - a. Using (viscoelastic) overlays
 - b. Positioning devices designed for this purpose
3. DO NOT use shoulder braces
4. DO NOT use circumferential wrist restraints

Lateral Position



AORN Guidelines Recommend:

1. Utilize a head positioner to maintain alignment of the patient's spine
2. Ensure ears are not folded over on themselves
3. Pad all bony prominences
4. Support and secure the patient's arms on two level and parallel arm boards, with an arm on each arm board, the upper arm above the lower arm, and both arms abducted less than 90°
5. DO NOT compress the patient's breasts and/or abdomen, or allow them to hang over the edge of the OR table
6. Place a safety strap across the patient's hips
7. Flex the patient's dependent leg at the hip and knee
8. Position the patient's upper leg straight, and place a support surface between the legs

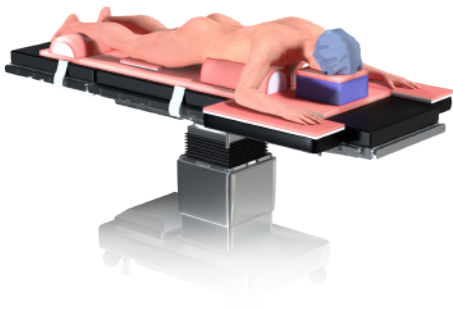
Sitting/Semi-Sitting Position



AORN Guidelines Recommend:

1. Minimize the degree of the patient's head elevation as much as possible
2. Flex and secure the patient's arms or non-operative arm across the body
3. Pad the patient's buttocks
4. Flex the patient's knees 30°
5. Verify placement and security of the safety restraint across the patient's thighs

Prone Position



AORN Guidelines Recommend:

1. Maintain cervical neck alignment with the head in a neutral forward position
2. Position Arms:
 - a. On a padded arm board, flexed 90° or less
 - b. Tucked at the side with the patient's palm facing the patient's body, and draw sheet tucked under the patient, not the mattress
 - c. Elbow must be supported to prevent hyperextension and/or flexion
 - d. Level the arm board pads with the OR Mattress
3. Position the patient on two chest supports that extend from the clavicle to the iliac crest
4. Position the patient's breasts, abdomen, and genitals in a manner that frees them from torsion or pressure
5. Pad the patient's knees
6. Place a support under the shin to float the toes off of any surfaces, and prevent hyperextension of the top of the foot. Pad all bony prominences.
7. Lubricate the eyes and protect them with a head positioner that redistributes pressure across the forehead and chin

Lithotomy Position



AORN Guidelines Recommend:

1. Stirrups:
 - a. Make sure stirrups are at a even height and are well padded
 - b. Legs are moved into stirrups together in one slow movement
 - c. Legs are removed from stirrups together in one slow movement
 - d. Place extra padding into stirrups as needed to protect leg surface
2. Position the patient's buttocks even with the lower break in the OR table
3. Position Arms:
 - a. On a padded arm board 90° or less
 - b. Tucked at the side with the patient's palms facing their body, and the draw sheet tucked under the patient (not the mattress)
 - c. Elbow must be supported to prevent hyperextension and/or flexion
 - d. Level the arm board pads with the OR Mattress
 - e. Ensure fingertips are protected
4. Place leg holders at an even height
5. Position heels securely into stirrups and lower/remove the table rest
6. Simultaneously lower the patient's legs onto the OR bed



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Reverse Trendelenburg Position



AORN Guidelines Recommend:

1. Use a padded footboard
2. Monitor the patient's feet throughout the procedure

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