POSITIONING & MOVING

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OBJECTIVES OF SESSION:

- To understand how positioning and moving can affect your health.
- To better understand your options for posture and seating positions.
- To discuss the most optimal ways of repositioning

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Position and Moving: Why is it Important?

- …Because positioning can affect so many areas of your health
  - Skin
  - Range of Motion
  - Appearance
  - Function
  - Pain
  - Socializing
  - Overall Health

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WHERE DOES POSITIONING and Moving HAPPEN?

1. In **BED**
2. In your **CHAIR**
3. During **ACTIVITIES**
4. For your **ARMS** / **HANDS**
5. For your **FEET**

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1. Bed Positioning

You spend a lot of time in bed during each 24 hour period.

Positioning in bed is just as important as positioning in your wheelchair

- For skin health
- For maintaining range
- To function (i.e. eating)

BALANCE IS KEY!

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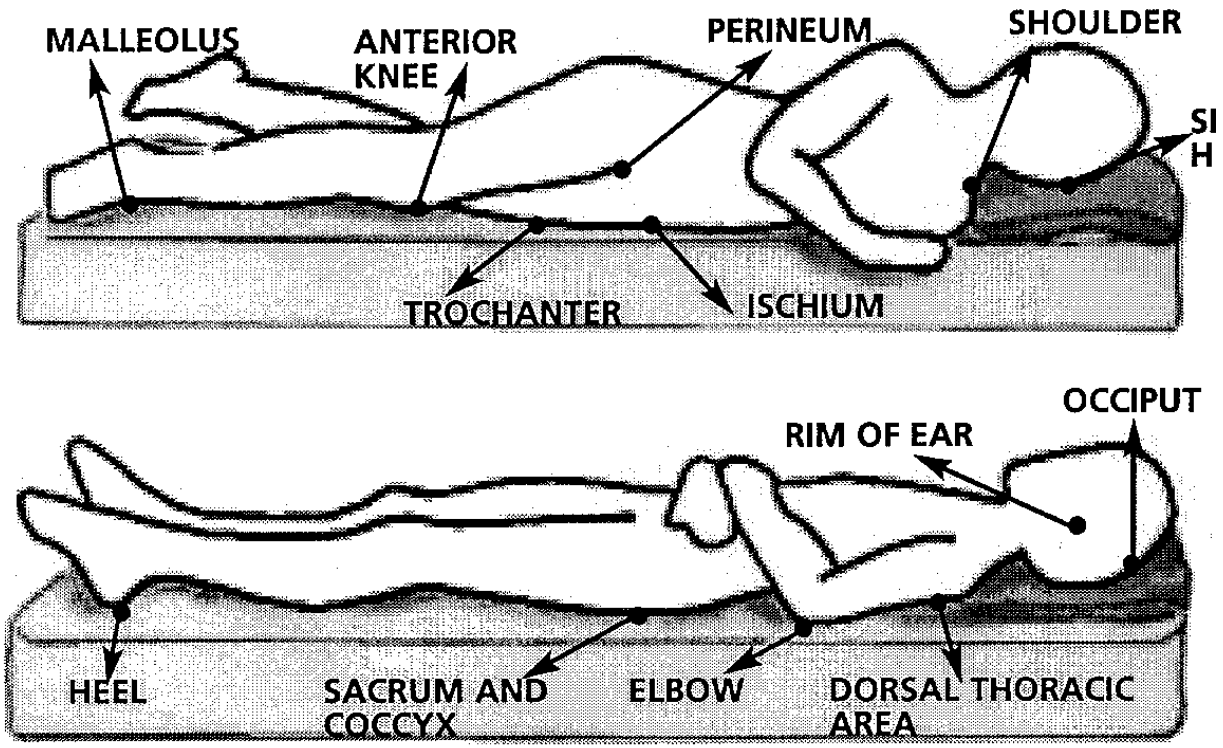
Areas of Highest Risk for Skin Breakdown when Lying in Bed

Figure 1: Pressure Points



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1. Bed Positioning

- Head of the bed – low as possible
- Knee gatch – putting the foot of the bed up before the head
- Heels and ankles – prop up calves on pillows

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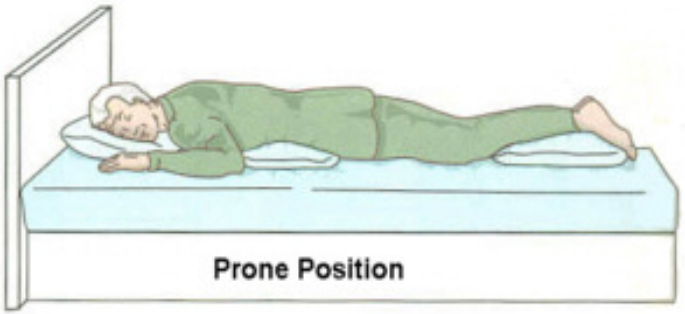
1. Bed Positioning

- Semi-side lying position –

Semisupine position is a variation of supine..

- Lying on your front -



Prone Position

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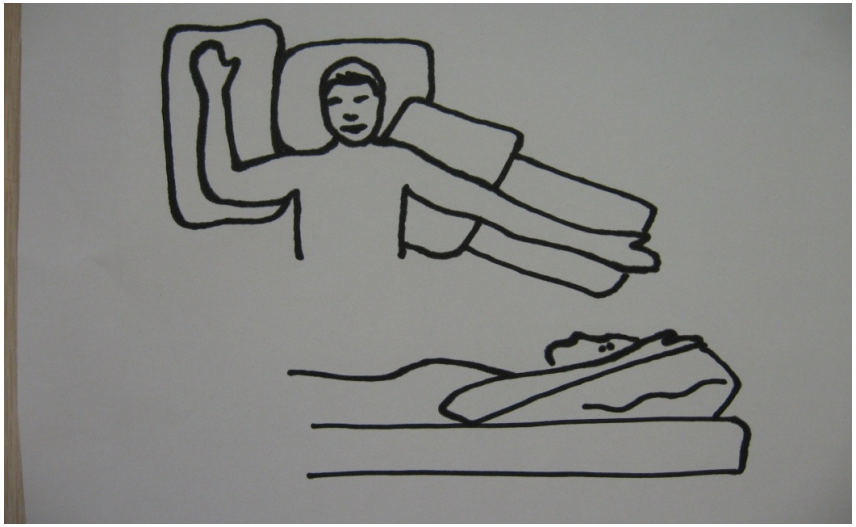
1. Bed Positioning (For Shoulders)



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2. Chair Positioning

Positioning and moving in your wheelchair is important

- For skin health
- For range
- To function (i.e. using your arms in activities, breathing, wheeling)

Your body will likely change over time – Keep track of what is going on with your body.

Involve a therapist for a seating review as soon as you notice a problem developing.

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Ideal Manual Wheelchair Set-Up

- Back vertical
- Seat pan slightly angled upwards (seat dump)
- Proper seat depth, only the length of thigh supported
- Thighs parallel to seat angle
- Hand should reach the axle
- Axle should be slightly ahead of shoulder.
- Balance point should be so you do not have “work to maintain sitting” in your wheelchair

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Power Wheelchair Set-Up

- Trunk upright and centered
- Armrests with elbows at right angles
- Thighs supported
- Hips and knees at right angles
- Feet supported on Foot pedals

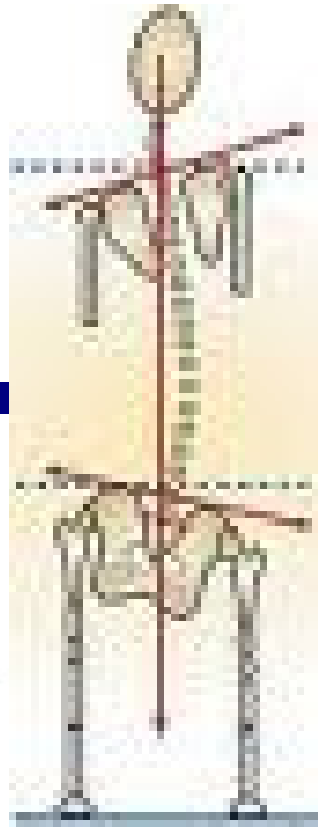
Don't ALWAYS Blame The Gremlins when Your Headrest Moves!!

2. Chair Positioning

What are some signs that you are not sitting well in your chair?

- New **pain** after being up in your chair for a while.
- New **difficulty doing things** that were easier yesterday.
- **Fatigue**.
- **Difficulty breathing**.
- Your **chair seems to have changed** the way it is setup overnight?
- Something doesn't **look** quite right when you look in the mirror.
- Something doesn't **feel** quite right (i.e. leaning).

2. Chair Positioning



- Check to see if your pelvis is level
  - Feel hips
  - Look at shoulders
  - Look at creases in body
- Check to see if your pelvis is rotated
  - Feel hips
  - Look at knees
  - Look at shoulders
- Ears over shoulders over hips

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3. Positioning and Moving for Hands and Arms

Splinting:

- To decrease the time spent in a non-desirable position.
- To encourage tissues to lengthen or shorten to help improve function.
- Night time use may be enough, or when tone and contractures are a concern, day and night-time use may be required.

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3. Positioning and Moving for Hands and Arms

Arm/hand program:

- Range of motion
- Positioning
- Exercises
- Daily Activities
  - Don't always make it too easy (but do if it is a repetitive activity)
  - Find activities which are meaningful and motivating
  - Balance your activities

USE IT OR LOSE IT!

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4. Positioning of Feet

In bed

In wheelchair

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CARE CONSIDERATIONS

- You are the teacher!
- Working with your care providers is a team effort.
- Use written materials or a helper to demonstrate.
- Be patient!

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Case example

- It has been over a year since you were discharged from GF Strong and you are noticing that you are constantly sliding forward in your chair throughout the day.

What should you consider doing?

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Case example

- You are noticing that you are unable to reach for objects as well as you used to – even passively, your elbow does not extend out straight.

What should you consider doing, regarding your positioning and movement?