

**MEHLVILLE FIRE PROTECTION DISTRICT  
EMERGENCY MEDICAL SERVICES  
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

**SUBJECT: 100.07  
OPERATIONS:  
PATIENT MOVEMENT**

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The Mehlville Fire Protection District, in the providing emergency medical services to the community, utilizes various equipment in the treatment and transportation of patients to local healthcare facilities. Some of this equipment is specifically designed for safe removal and transportation of patients from the scene of the incident to the healthcare facility. In establishing safe work practices, a policy is required to insure the safe utilization of said equipment in the transportation of the ill and injured patient.

*Equipment Identification*

*Backboard Devices* – backboard devices are utilized to insure the safe and proper immobilization of the patient suspected of sustaining spinal injuries whether the short or long board device is required.

*Soft-Stretchers* – a device which is pliable and has the ability to remove a patient from a location which does not allow the use of the ambulance stretcher or other immobilization devices.

*Stokes-Basket/SKED* – devices which allow the removal of a patient from various terrain encounters, allowing an individual to be properly secured within the basket/device for safe transfer from the hazardous environment to another transfer device such as the ambulance stretcher.

*Stair-Chair Device* – stair-chairs are utilized to safely remove a patient from a location which is not assessable by the ambulance stretcher and/or in a position of another elevation which makes it impractical and unsafe to utilize the ambulance stretcher to remove the patient.

*Ambulance Stretcher* – a stretcher is a device which allows the safe transportation of a patient, secured from within the patient compartment of the ambulance.

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*Equipment Utilization Policy*

All patient encounters will be approach in a manner which displays the utmost safety to both the patient and District employees. Alarms which have an engine company assist the ambulance crew will participate in the packaging and removal of the patient from the specific incident site to the placement into the ambulance. This entails performing **4 Point** lifting maneuvers when the patient is attached to any of the aforementioned equipment devices in **ALL** movements; until the patient is actually secured into the ambulance.

Situations where the ambulance crew is not assisted with an engine company; the ambulance crew will determine if additional manpower is indicated to safely remove the patient from the incident site and secured into the ambulance. Patients determined to be 200 lbs., or greater, in weight will be the deciding factor in requesting additional manpower to the scene.

Other situations encountered by an ambulance crew which is felt to pose ergonomic issues are expected to have an engine company dispatched to the scene for assistance. Bariatric patients which are encountered may require an additional engine company or the squad for assistance. If both are utilized (squad & engine company), the engine company may return to their quarters once the patient is secured into the ambulance. The squad will follow the ambulance to the hospital and assist in removing the patient from the ambulance. Should this occur, the engine company near the hospital may be requested to meet the ambulance and squad for patient removal.

Patients which are transported to an outlying healthcare facility will require notification to that respective hospital that assistance is required for the removal of the patient. This may involve requesting that local fire service organization for assistance at that receiving hospital. The Duty Officer will be notified on **all** situations involving such incidents.

***The use of the Equipment Utilization Policy is mandatory. When in doubt, it will be initiated. Sufficient manpower will be utilized to protect the safety of both the patient and District personnel.***