

	Metropolitan Ambulance Service		Rural Ambulance Victoria
	Work Instruction	Side application of a Scoop Stretcher (Patient in supine position)	
	Version 1 1/3/01		
	EQUIPMENT:	Scoop stretcher, head padding, patient, assistant	Number WI: 5.1.9 Sheet 1 of 1


STAGES	KEY POINTS	RATIONALE
1. Prepare patient.	<ol style="list-style-type: none"> 1. Inform & reassure the patient. 2. Ensure no objects are around the patient. 3. Place padding under head of patient as needed. 4. If spinal injury suspected, apply cervical collar. (Refer WI 4.2.2./4.2.3.). 5. Maintain manual head stabilisation until head is properly secured to the Scoop Stretcher. 	<p>Prevents further injuries during the manoeuvre. Maintains spine alignment.</p> <p>Feet overhanging plate interfere with locking mechanism.</p>
2. Adjust length of Scoop Stretcher	<ol style="list-style-type: none"> 1. Place Scoop beside patient with shoulders covering second hand hold at the level of the pin. 2. Loosen leg extension locks and lengthen until heels of feet are level with bottom of base plate. 3. Re-tighten locks with finger pressure only. 	Prevents the Scoop pinching the patient at the shoulders.
3. Position Scoop	<ol style="list-style-type: none"> 1. Split Scoop in half at both ends. 2. Place one half on each side of the patient 3. Ensure second hand hold is just covered by shoulders 	
4. Slide Scoop into place	<p>Both Attendants move to same side of patient</p> <p><u>Attendant 1.</u></p> <ol style="list-style-type: none"> 1. Kneel at patient's side, level with the chest. 2. Top hand grasps patient's clothes at shoulder blade level and gently pulls clothes to the side. 3. Lower hand is placed on the Scoop around lower chest region. <p><u>Attendant 2.</u></p> <ol style="list-style-type: none"> 1. Kneel at patient's pelvic region, same side as attendant 1. 2. Top hand grasps patient's clothes at buttocks level and gently pulls clothes to the side. 3. Lower hand is placed on the extension poles of the Scoop. <p><u>Attendant 1 & 2 working together.</u></p> <ol style="list-style-type: none"> 1. Slowly slide scoop under the patient to the midway point, with both Attendants maintaining pressure on the Scoop until both ends are in place. 2. Avoid logrolling patient. 3. Repeat above to place other side of Scoop into place. 4. Ensure locking mechanisms at both the head end and foot end are touching, but not locked. 	<p>Prevents Scoop pinching the patient at the buttock.</p> <p>If one of the Attendant's lets go while the other Attendant is still applying pressure, the Scoop will come out.</p>

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	EQUIPMENT:	Scoop stretcher, head padding, patient, assistant		Competency Assessment

ACTIVITY	CRITICAL PERFORMANCE	PASS	FAIL
1. Prepare patient.	<ol style="list-style-type: none"> 1. Informs & reassures the patient. 2. Ensures no objects are around the patient. 3. Places padding under head of patient as needed. 4. If spinal injury suspected, applies cervical collar. (refer WI 4.2.2./4.2.3.) 5. Maintains manual head stabilisation until head is properly secured to the Scoop Stretcher.
2. Adjust length of Scoop Stretcher	<ol style="list-style-type: none"> 1. Places Scoop beside patient with shoulders covering second hand hold at the level of the pin. 2. Loosens leg extension locks and lengthen until heels of feet are level with bottom of base plate. 3. Re-tightens locks with finger pressure only.
3. Position Scoop	<ol style="list-style-type: none"> 1. Splits Scoop in half at both ends. 2. Places one half on each side of the patient 3. Ensures second hand hold is just covered by shoulders
4. Slide Scoop into place	<p>Both Attendants move to same side of patient</p> <p><u>Attendant 1.</u></p> <ol style="list-style-type: none"> 1. Kneels at patient's side, level with the chest. 2. Top hand grasps patient's clothes at shoulder blade level and gently pulls clothes to the side. 3. Lower hand is placed on the Scoop around lower chest region. <p><u>Attendant 2.</u></p> <ol style="list-style-type: none"> 1. Kneel at patient's pelvic region, same side as attendant 1. 2. Top hand grasps patient's clothes at buttocks level and gently pulls clothes to the side. 3. Lower hand is placed on the extension poles of the Scoop. <p><u>Attendant 1 & 2 working together.</u></p> <ol style="list-style-type: none"> 1. Slowly slides scoop under the patient to the midway point, with both Attendants maintaining pressure on the Scoop until both ends are in place. 2. Avoids logrolling patient. 3. Repeats above to place other side of Scoop into place. 4. Ensures locking mechanisms at both the head end and foot end are touching, but not locked.

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STAGES	KEY POINTS	RATIONALE
5. Lock Head of Scoop	<p><u>Attendant 2.</u></p> <ol style="list-style-type: none"> 1. Move to foot end of Scoop. 2. Grasp foot end of Scoop with hands on top of Scoop on either side of locking mechanism. 3. Hold while Attendant 1 locks head end of Scoop. <p><u>Attendant 1.</u></p> <ol style="list-style-type: none"> 1. Move to head of Scoop. 2. Grasp head end of Scoop with hands on top of Scoop on either side of locking mechanism. 3. With Attendant 2 holding foot end on Scoop, slowly lock sides at head end together. Hold pin up while closing. 4. If difficult to close, ask bystander to place lateral inward pressure no more than 30 cm from head end. 5. Now move to foot end to help Attendant 2 close foot end. <p><u>Attendant 2.</u></p> <ol style="list-style-type: none"> 1. Holding end as described above slowly close foot end. Hold pin up while closing. 2. If difficult to close, ask Attendant 1 to place lateral inward pressure no more than 30 cm from foot end. 3. Place a Hand & Wrist airsplint under patient's lumbar back and inflate until comfortable. 	<p>Prevents foot end from spreading apart which may lead to pinching.</p> <p>Splints spine & reduces spinal sagging.</p> <p>A click ensures locking pin is secured. Makes closing of the Scoop very easy. A click ensures locking pin is secured.</p> <p>Makes closing of the Scoop very easy Supports natural curve in lumbar spine and prevents lumbar pain.</p>
6. Immobilise or secure patient to Scoop as required by patient's condition	<ol style="list-style-type: none"> 1. Refer to WI 5.1.11. 	<p>Prevents spine or other fractures moving, and stops patient falling off during transport.</p>
7. Checks	<ol style="list-style-type: none"> 1. Locking pins secure. 2. Comfort. 3. Correct padding (occipital and lumbar). 	
NOTE: This is the preferred method of Scoop application for when unstable or uneven ground.		

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ACTIVITY	CRITICAL PERFORMANCE	PASS	FAIL
5. Lock Head of Scoop	<u>Attendant 2.</u> 1. Moves to foot end of Scoop. 2. Grasps foot end of Scoop with hands on top of Scoop on either side of locking mechanism. 3. Holds while Attendant 1 locks head end of Scoop. <u>Attendant 1.</u> 1. Moves to head of Scoop. 2. Grasps head end of Scoop with hands on top of Scoop on either side of locking mechanism. 3. With Attendant 2 holding foot end on Scoop, slowly locks sides at head end together. Holds pin up while closing. 4. If difficult to close, asks bystander to place lateral inward pressure no more than 30 cm from head end. 5. Now moves to foot end to help Attendant 2 closes foot end. <u>Attendant 2.</u> 1. Holding end as described above slowly closes foot end. Holds pin up while closing. 2. If difficult to close, ask Attendant 1 to place lateral inward pressure no more than 30 cm from foot end. 3. Places a Hand & Wrist airsplint under patient's lumber back and inflates until comfortable.
6. Immobilise or secure patient to Scoop as required by patient's condition	1. Refer to WI 5.1.11.
7. Checks	1. Locking pins secure. 2. Comfort. 3. Correct padding (occipital and lumber).

CANDIDATES NAME: _____

DATE: _____

Comments:

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Instructor: (please print)

Satisfactory practical performance

Unsatisfactory practical performance