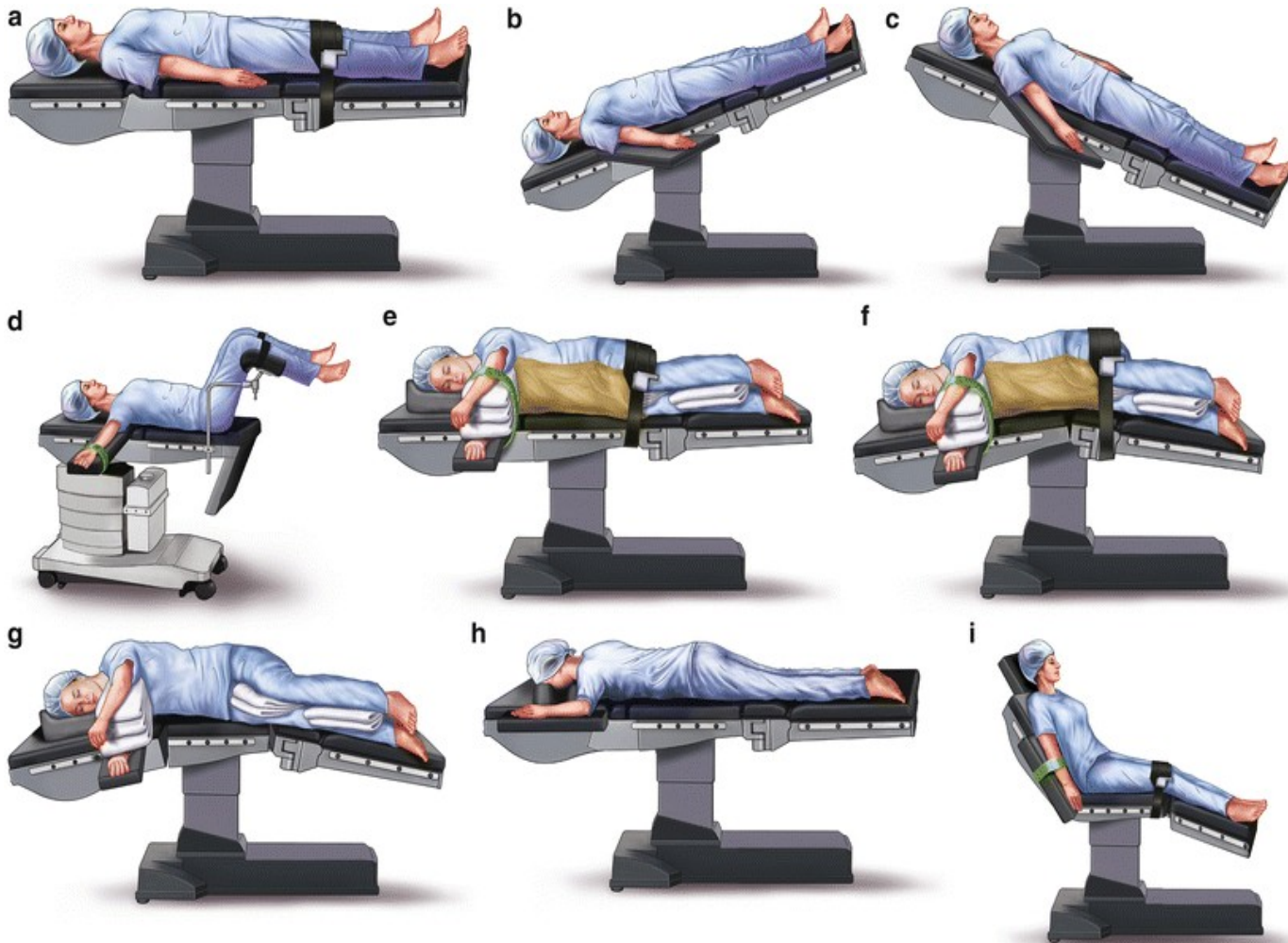


Positions of patients during surgery



Contents of the lesson:

- ✓ **What is positioning during surgery.**
- ✓ **Benefits from positioning during surgery.**
- ✓ **Common position during surgery and uses for any type of surgery.**

Surgical positioning :

- is the practice of placing a patient in a particular physical position during surgery.
- The goal in selecting and adjusting a particular surgical position is to maintain the patient's safety while allowing access to the surgical site.
- Often a patient must be placed in an unnatural position to gain access to the surgical site.
- Positioning normally occurs after the administration of anesthesia.

- In surgery, proper patient positioning provides optimal exposure to the surgical/treatment site and maintenance of the patient's dignity by controlling unnecessary exposure.
- In most settings, positioning patients to provide airway management and ventilation, maintain body alignment, and providing physiologic safety.

Benefits of patient positioning:

- Enables IV lines and catheters to remain patent.
- Enables monitors to function properly.
- Facilitates the surgeon's technical approach.
- Patient safety (Don't Let The Patient Fall Off The Table).

- Multiple factors should be considered when choosing the patient's position. These factors include patient age, weight, and size as well as past medical history, including respiratory or circulatory disorders.

of patient during
surgery:

1. Supine Position:

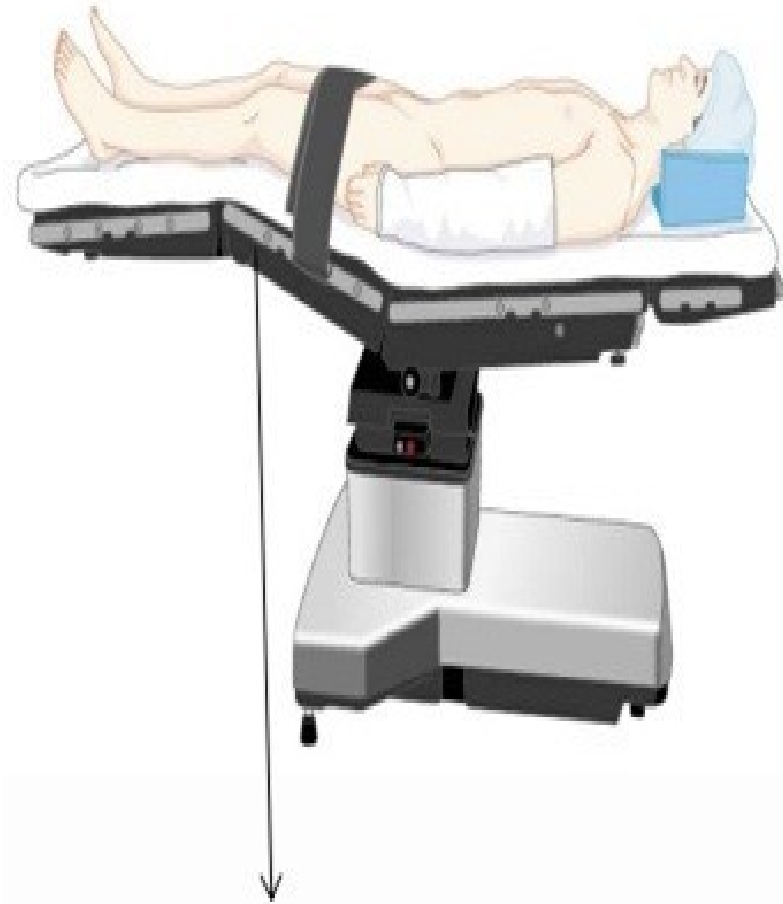
This is the most common position for surgery with a patient lying on his or her back with head, neck, and spine in neutral positioning and arms either adducted alongside the patient or abducted to less than



Variations:

❖ **Lawnchair position:**

A variation of supine in which the hips and knees are slightly flexed and above the level of the heart relieves pressure on the back, hips, and knees and facilitates venous drainage from the lower extremities, and reduces tension on the



15 degree flexion

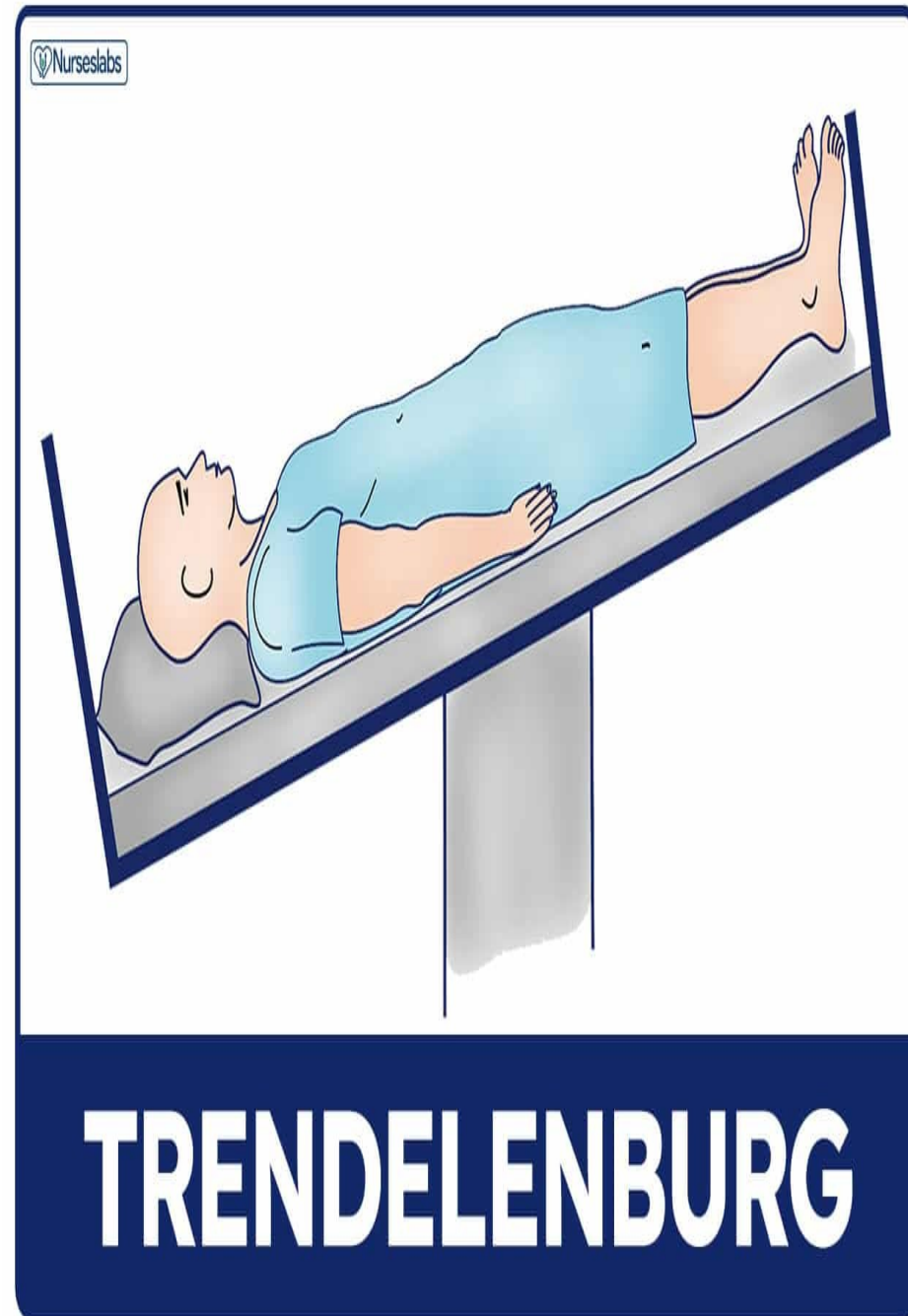
❖ **Frog-leg position:**

A variation of supine in which the hips and knees are flexed, and the hips are externally rotated facilitates access to the perineum, groin, rectum, and inner thigh, but the knees must be supported to avoid stress and dislocation of the hips.



❖ **Trendelenburg position:**

A variation of supine in which the head of the bed is tilted down such that the pubic symphysis is the highest point of the trunk facilitates venous return and improves exposure during abdominal and laparoscopic surgeries



❖ **Reverse Trendelenburg position:**

A variation of supine in which the head of the bed is tilted upward such that the head is the highest point of the trunk facilitates upper abdominal surgery.



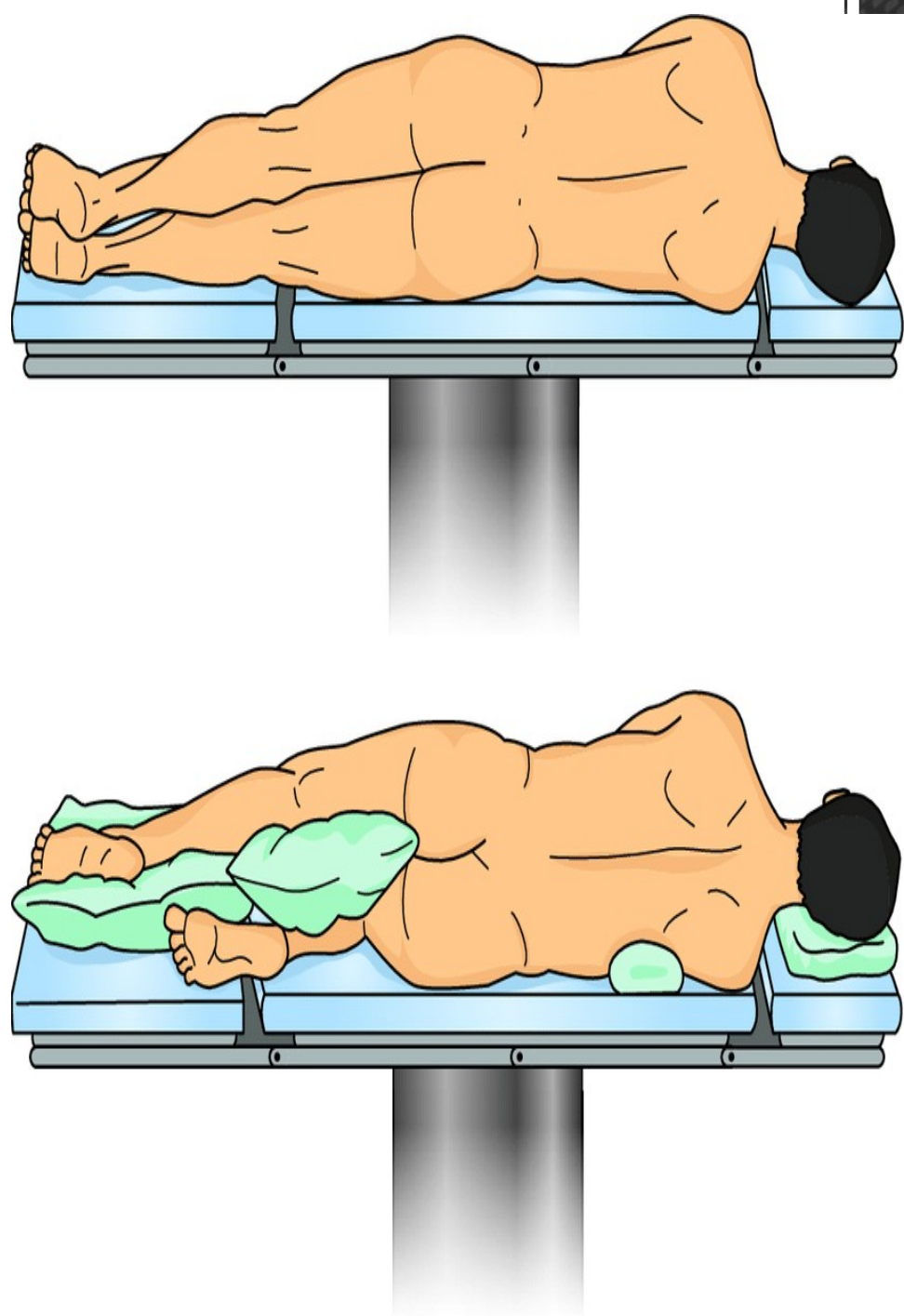
❖ **Lithotomy Position:**

Commonly used during gynecologic, rectal, and urologic surgeries with a patient lying supine with legs abducted 30 to 45 degrees from midline with knees flexed and legs held supported with the foot of the bed lowered or removed to facilitate the procedure.



2.Lateral Decubitus Position:

Commonly used during surgery requiring access to the thorax, retro-peritoneum, or hip with a patient lying on the non operative side and careful positioning of the extremities.



during surgery
requiring access to
the posterior fossa of
the skull, posterior
spine, buttocks or
perirectal area, or
lower extremities
with the patient lying
on his or her front
with head, neck, and
spine maintained in a
neutral position; the
patient is turned from
supine to prone while
maintaining the



4.Fowler's Position:

- This is the most common position for patient resting comfortably, whether inpatient or in the emergency department, with knees either straight or slightly bent and the head of the bed between 45 and 60 degrees.
- Fowler's position is usually used in surgeries that involve neurosurgery or the shoulders

