

## AIRTAP QUICK STEPS

### CCTC Criteria for Use: **CONTRAINDICATIONS C-Spine Precautions**

- a. Weight greater than 250 lbs
- b. Unconscious/sedated/bed-bound
- c. Anticipated LOS > 48 hours
- d. Other indications at discretion of Charge Nurse

1. Supplies on cart on East wall of Bay 5 Supply Room
2. The regular AirTap (small package) should only be used for patients who are 250-300 lbs with a modest girth. We have 2 on the cart at present, but when these are used we will only order the bariatric size. These can be used for patients UP to 1200 lbs.
3. DO NOT return an opened package to the cart if you removed the AirTap (pad). This will look like a full package and HMMS will not restock.

With repeated boosting, the AirTap may need to be repositioned by rolling the patient off and back on the pad. For patients with a long length of stay or who are very unstable, alternating turns with a second AirTap may be appropriate. This must be approved by the CN. We will soon have a supply of AirTap only packages.

4. Place the AirTap under the patient with one large Prevalon Microclimate pad. The long side of the pad is positioned head to toe. If you do not have the large pads, you can place two smaller pads above and below each other with long end positioned side-to-side.
5. Plug the pump into a wall outlet and not the articulating arm.
6. Do not place a sheet between the AirTap and the bed.
7. ALWAYS KEEP BED RAILS UP. Even when deflated the AirTap is very slippery under patient.
8. The AirTap inflates VERY quickly and patient may slide with the motion of inflation. Ensure bedrails are up and one person is beside the patient in case they move toward the side. When inflated, one person can easily move the patient on the AirTap.
9. To turn a patient, use the turning handles.
10. Use wedges to facilitate positioning (see video). Working from the FOOT of the bed, have one person hold the wedge toward the side where you want it placed, and a second person on the side of the tail. Maxi-inflate bed mattress and inflate AirTap. "Walk" the tails up to position. One wedge should be above and one below buttock.

Turn patient away from the wedges with AirTap inflated. Position wedge to desired location while second person pulls the tails tightly. Deflate mattress to secure wedge into position. Be sure to turn the maxi-inflate off the bed mattress when done.

11. To transfer a patient from bed to stretcher or CT table, secure the "receiving" surface and make sure it is ~1-2 inches lower than the patient surface. Make sure breaks are on both surfaces, then inflate AirTap and move the patient.
12. The pump can be removed from the stand if easier during transport – pull the release button out and slide the pump from the portable stand.