

Hospital teams coached in life-saving 'swimmer's pose'

Aisha Dow

These teams could bolster their ranks with occupational therapists and theatre technicians, if demand increases.

Physiotherapists are already experienced with managing the manoeuvre in patients with a severe lung infection but might only do the move a handful of times a year under normal circumstances.



Western Health's senior ICU physiotherapist Kimberley Haines. *Credit: Justin McManus*

Western Health senior ICU physiotherapist Kimberley Haines said 40 physiotherapists and patient services assistants had undergone training in a simulation lab.

Dr Haines said they had also begun looking at recruiting other staff that might be skilled in moving immobilised patients in tricky circumstances, including theatre technicians and occupational therapists.

“Occupational therapists usually care for patients with neurological disease, so they are used to moving and handling patients who’ve had a stroke,” she said.

The prone teams typically involve a doctor or critical-care nurse managing the airway at the head of the patient and a senior physiotherapist overseeing the move, while nurses and other assistants are positioned around the rest of the patient.

The entire procedure generally takes around 20 minutes with the patient heavily sedated, Dr Haines said.

“The position is called a swimmer’s pose. It’s as if you were doing freestyle, so you have an arm raised overhead and the head is turned to the side, with the patient ventilated with an endotracheal tube.”

Cabrini Health deputy director of intensive care Associate Professor David Brewster said he had recently had a patient in the unit who was now almost fully recovered after being placed in the prone position over several days.

He said patients were typically left prone for 16 hours and research had shown it significantly improved survival for people with severe acute respiratory distress syndrome.

“It improves oxygenation almost immediately,” he said.

In the meantime, speech pathologists are also making preparations for an influx of coronavirus patients – a scenario that continues to look less likely as Victoria makes headway suppressing new cases.

Lauren Belleli, a speech pathologist at Western Health, said some coronavirus patients could require help communicating as they recover from a long stint in intensive care.

Ms Belleli said for patients with a tracheostomy tube, an option could be using a valve that sat on top of the tube and allowed patients to speak, but not everyone was able to tolerate that.

She said in those cases they might have to get creative - using alphabet or picture boards that patients could point, nod to, or even use eye gaze to communicate.

Sign up to our Coronavirus Update newsletter

Get our Coronavirus Update newsletter for the day's crucial developments at a glance, the numbers you need to know and what our readers are saying. Sign up to *The Sydney Morning Herald's* newsletter [here](#) and *The Age's* [here](#).