## Pre-Procedure Checklist

| Task                                                                 | Completed |
|----------------------------------------------------------------------|-----------|
| Patient fulfils criteria for prone positioning and no absolute contra-indications. | ✔️        |
| Explanation to family members (where possible).                      | ✔️        |
| Procedure planned with staff (ensure all staff understand process, show video if needed). | ✔️        |
| Anaesthetist informed (duty Anaesthetist called and confirmed).     | ✔️        |
| Required equipment plus emergency & airway equipment checked and at bedside. | ✔️        |
| Required trained staff available at the bedside and ready to proceed. | ✔️        |
| Pillows removed from bed.                                           | ✔️        |
| Patient hygiene cares attended.                                     | ✔️        |
| Vulnerable pressure areas (including all lines and drains) protected.| ✔️        |
| Adequate eye protection applied.                                    | ✔️        |
| Analgesia and sedation bolused to RASS -5 +/- NMB (with TOF <2).    | ✔️        |
| Enteral feed ceased, gastric tube aspirated and spigoted.            | ✔️        |
| Pre-oxygenation with FIO2 1.0.                                       | ✔️        |
| SpO2, ETCO2, MAP checked and stable.                                | ✔️        |
| Only vasoactive drug line running (all other infusions ceased but lines remain attached). | ✔️     |
| ECG monitoring from chest removed.                                  | ✔️        |
| ETT and oropharynx suctioned, and ETAD changed to tape.             | ✔️        |
| All drains secured, with adequate length to complete turn, and appropriately aligned. | ✔️ |
| Dedicated staff member to support ICC during turn (if applicable).   | ✔️        |
| Lines minimised, secured, appropriately aligned, and adequate length to complete turn. | ✔️ |
| Transducers and pumps appropriately positioned and aligned.         | ✔️        |
| CRRT paused and filter set recirculated.                            | ✔️        |
### Turning the patient supine to prone

| Task                                                                 | Completed |
|----------------------------------------------------------------------|-----------|
| Place 2 slide sheets & 1 bed sheet under the patient (in that order i.e. original bedsheets, 2 slide sheets, bed sheet, patient) | ☐        |
| Place 3 pillows (4 for bariatric) on patient in the appropriate positions and place bed on max inflate. | ☐        |
| Place new bedsheets over patient, position patient arms and fingers, firmly roll the edges of the old and new sheets together, ensuring pillows are held securely in place. | ☐        |
| Lateral movement of patient on the bed **away from ventilator**.        | ☐        |
| The patient is then rolled laterally onto their side, **facing the ventilator**. | ☐        |
| The patient is finally rolled to prone position.                      | ☐        |
| Check airway. Inspect ETT position, SpO2. Unclamp ICC (if clamped for turn). | ☐        |
| Position disposable support/pillow under the patient's face and turn head to one side. | ☐        |
| Establish ECG monitoring on patient's back.                           | ☐        |
| Position arms and legs.                                               | ☐        |

### Post Procedure

| Task                                                                 | Completed |
|----------------------------------------------------------------------|-----------|
| The consultant checks ventilator parameters and adjusts settings accordingly. | ☐        |
| Ensure all infusions, tubes, drains are patent and free of kinks/compressions and re-establish enteral feeds. | ☐        |
| Bed placed in reverse Trendelenburg (foot tilt down 30 degrees or as much as bed allows). | ☐        |
| Relieve pressure areas as able (e.g. head, arms, knees, feet, genitalia) by repositioning regularly. | ☐        |
| Ensure both bottom sheets are wrinkle & crease free post proning & removal of slide sheets | ☐        |
| Position of head changed every three hours to redistribute facial and periorbital oedema, ensuring easy access to ETT and NG tubes. | ☐        |
| 3-4 hourly modified turn can be achieved by placing back wedge under bed sheet to create slight lateral tilt. | ☐        |
| 2nd hourly eye and mouth care; 8th hourly passive limb exercises.     | ☐        |
| Reassess neurological status and titrate prescribed sedation as clinical indicated to manage pain and agitation. | ☐        |