

Rapid Patient Mover (RPM) Instructions for Use

Disclaimer

The Rapid Patient Mover (RPM) is a patient moving adjunct that is easy to carry and deploy. The RPM is intended for use by trained rescuers and healthcare providers. When determining how best to secure and move a patient using the RPM, providers should refer to their training and local protocol for decision making purposes. The makers of the RPM do not guarantee or imply that any of the techniques discussed in these instructions will be best suited, or even allowed by local protocol, for any particular situation.

WARNING: The RPM is not intended to treat injury. The RPM is not intended to stabilize a person in any way that may be construed to be aiding in the treatment or prevention of any injury or illness.

The RPM is not intended to be used as a spinal immobilization device. It does not by itself adequately restrict spinal motion, but can be effectively used in conjunction with most available spinal immobilization adjuncts. For example, a patient on a backboard can easily be carried or dragged in the RPM. Please refer to your local protocol for proper spinal immobilization techniques.

Deploying the RPM

Single Rescuer - Head to Toe

1. Remove the RPM from its case and place it at the head of the patient so that the folded sides are facing up (FIG 1).

FIG 1.



- 2. Unfold the sides of the RPM. Place the RPM under the patient's head so that two loop handles are pointed toward the feet and two loop handles are pointed away from the head (FIG 2).
 - FIG 2.



- 3. Move to a position facing the patient. Reach under the patient's arms and grasp the two loop handles that will be just at the shoulders. Pull the loop handles toward the feet (FIG 3).
 - FIG 3.



4. Continue to pull flat against the ground and move toward the patients feet until the RPM is entirely deployed (FIG 4).

If necessary, reposition the patient up or down on the RPM by gently

sliding so that the patients head is

NOTE: If the leading edge of the RPM comes to rest against any part of the patient or their clothing, prohibiting the device from easily being advanced, manually reposition the patient slightly to free the edge of the RPM and continue to deploy as indicated above.

resting in the center of an

embedded plate.

FIG 4.



The RPM can also be deployed by a single rescuer from toe to head or from the waist in a similar manner.

Deploying the RPM (cont.)

Two Rescuers - Head to Toe

- 1. Remove the RPM from its case and place it at the head of the patient so that the folded sides are up.
- 2. Unfold the sides of the RPM. Rescuer 1 places the RPM under the patient's head so that two loop handles are pointed toward the feet and two loop handles are pointed away from the head.
- 3. Rescuer 2 moves to a position facing the patient. Rescuer 1 reaches over the patients arms and holds the patient still.
- 4. Rescuer 2 reaches under the patient's arms and grasps the two loop handles that will be just at the shoulders. Rescuer 2 pulls the loop handles toward the feet while Rescuer 1 maintains the patient's position.
- Rescuer 2 continues to pull flat against the ground and move toward the patient's feet until the RPM is entirely deployed. If necessary, Rescuer 1 repositions the patient up or down on the RPM by gently sliding so that the patient's head is resting in the center of an embedded plate.

NOTE: If the leading edge of the RPM comes to rest against any part of the patient or their clothing, prohibiting the device from easily being advanced, manually reposition the patient slightly to free the edge of the RPM and continue to deploy as indicated above.

The RPM can also be deployed by two rescuers from toe to head or from the waist in a similar manner.

Proper patient positioning

Positioning the head

Patients should be positioned on the RPM with their head roughly in the center of an embedded plate (FIG 2).

Securing the patient

Using patient securing straps

The RPM is supplied with two securing straps that can be easily attached to any of the attachment points on the RPM. Select the optimal attachment point and simply connect the carabiner through the spring loaded gate (FIG 5). Tighten the strap by pulling the strap through the buckle.

Attachment points

All of the spaces created between stitches in the 1" strap running in several rows on the RPM are

designed to be both handles for lifting and carrying a patient in the RPM, and attachment points for securing straps. The loop handles present in the 2" strap at both ends of the RPM may also serve as attachment points or handles. These loops are specifically intended to be the primary attachment points for the drag harness (sold separately).

Securing methods

When attaching straps to secure a patient, care should be taken to ensure the patient is secured in a way that limits any sliding or shifting during a drag or carry. While it is always advisable to completely secure a patient prior to moving them with the RPM, certain conditions may require hastily leaving an area thus limiting securing to only that which is absolutely

necessary. While not optimal, placing one securing strap over the torso and ensuring that the strap is snug will keep the patient from sliding out of the RPM during a drag removal (FIG 7).

FIG 6.

NOTE: This method of securing the patient is not sufficient if the patient needs to be dragged up or down stairs or any other significant angle.

Alternative securing methods

Due to the availability of multiple attachment points one method of securing a patient into the RPM involves passing the securing straps through several attachment points before clipping in the far carabiner (FIG 6).

(continued on next page)





Positioning small patients

For patients under approximately 50 inches in height fold the last plate section of the RPM over the patient's legs to aid in ensuring that the patient's head remains over an embedded plate by limiting the amount a patient could slide in the RPM when being dragged.

FIG 5.



Dragging a patient

The RPM is made from a highly abrasion resistant ballistic weave nylon and has three embedded plates for maximum durability if dragged. The RPM can be dragged over most indoor surfaces such as tile, hardwood, carpet, and linoleum with minimal wear over short distances. The RPM can be dragged over grass and sand very effectively, with only moderate signs of wear over short distances.

WARNING: The RPM is not designed for dragging over rough surfaces such as asphalt, unfinished concrete, or rocks. Testing has shown that these surfaces will generally create holes in the material base at the greatest points of friction. If it becomes necessary to drag a patient over a rough surface, the embedded plates will partially protect the patient from harm. While holes may develop in the carrier, it is extremely unlikely that the RPM will lose any of its functionality.

FIG 8.

Attaching the drag harness (sold separately)

The drag harness comes with two carabiners. Attach the drag harness to the RPM by clipping the carabiners to the loop handles at either end of the RPM (FIG 8).

NOTE: The patient should always be dragged head first using the loop handles as attachment points for the drag harness or other dragging equipment such as rescue rope or straps. DO NOT use the 1" side attachment points for the purpose of attaching dragging equipment.



With the drag harness attached, a single rescuer can place one arm loop over each shoulder and drag by leaning forward and walking. As an alternative, both arm loops can be placed over the same shoulder.

Manipulating the patient in tight areas

Two rescuer drag

With the drag harness attached, two rescuers can place one arm each into an arm loop. This should be done so that the drag harness is used between the two rescuers and NOT placed on the outside arms of the rescuers.

When approaching a corner or other obstacle it is helpful to allow as much room as possible to negotiate turns. Occasionally it will be necessary to manipulate your patient around corners and obstacles with your hands. When dragging a patient using the drag harness you can reach back and grab the intermediate drag harness strap with your hand, and guide the patient around obstacles with them in a closer position to you. Once the obstacle is cleared you can return to dragging as described above.

Carrying a patient

Carrying from the sides

The multiple rows of handles on both sides of the RPM ensure that you will always have a handle to grab right where you need it. Two or more rescuers can stand on either side of the patient and lift.

Carrying from the ends

There may be instances when a patient needs to be carried from the head and foot ends due to space limitations. To do this, lift using the loop handles on both ends of the RPM.

Moving a patient up or down an incline

Attaching a rope

The RPM can easily be dragged up or lowered down an incline by attaching a rope or ropes to the loop handles on either end of the device.

NOTE: Any time a patient needs to be moved up or down an incline in the RPM it is important to ensure that patient movement inside the RPM is minimized by properly securing the patient.

Using the RPM with mechanical CPR

Securing the patient with mechanical CPR

When the RPM is used to move a patient receiving mechanical CPR, use one securing strap to stabilize the mechanical CPR device in the RPM. Use the second securing strap to secure the lower half of the patient's body.

Carrying

The RPM can be carried as described above, even with mechanical CPR being performed.

Care and cleaning

If your RPM becomes soiled it can be easily cleaned, either in a commercial washing machine at low temperature or by hand using warm water with a mild detergent. Allow the RPM to hang to dry completely before returning it to service.

Folding and storage

The RPM is designed to be put away as easily as it is deployed. It is important to note that in order for the RPM to take advantage of the Z-fold design for rapid deployment, it must be folded correctly when it is stored.

Step 1: Deploy the RPM on a clean, flat surface. Place the RPM so that the patient carrying side is face up. Visually inspect the RPM for wear and ensure that it is clean and dry.

NOTE: Because of the strength of the ballistic weave nylon, the RPM remains a safe and effective patient carrier even if it is found to have small tears or areas of wear in the fabric. Holes in the ballistic nylon do not readily expand.

Step 2: Kneel at one end of the RPM. Reach forward and grasp the RPM on both sides at points even with the furthest edge of the first embedded plate (FIG 9).

Step 3: Lift up and slide the section forward until the first embedded plate is evenly placed on top of the middle embedded plate (FIG 10)

Step 4: Now grasp the RPM so that you are holding three layers of material on both sides at points even with the furthest edge of the middle embedded plate (FIG 11).

Step 5: Lift up and slide the first two sections forward until all three embedded plates are lined up on top of each other (FIG 12).

Step 6: Fold the material on both sides of the RPM inward so that they are resting on top of the stack of embedded plates (FIG 13). Return the RPM to the carrying case.

FIG 11.



FIG 12.











For more information or to place an order, visit us online at:

www.B2Products.com

- eb2products
 - facebook.com/B2Products
- in linkedin.com/company/b2-products-llc