



Instructions for awake proning of a patient on oxygen via a reservoir mask



When to try awake proning:

Try proning any patient with COVID-19 who requires supplemental oxygen to maintain oxygen saturations above 90%. Don't attempt proning if the patient is unconscious or has a respiratory rate greater than 40 breaths per minute.

Equipment required:

- Mattress (or pile of folded blankets)
- Bedsheet
- Minimum 3 pillows (more for obese patients)
- Rolled towel (optional)
- Means for patient to attract attention (e.g. rattle or bell)
- Oxygen saturation probe
- Additional padding for pressure areas if required



Procedure:

1) COMMUNICATE:

Explain what proning will entail to the patient and their family. Explain that this position will hopefully help their breathing.

2) PREPARE THE EQUIPMENT:

Gather as many pillows, towels and blankets as are available. It is best for the patient to be lying on a mattress with a bedsheet where possible to avoid pressure sores. If none is available, use a pile of blankets instead.

3) PREPARE THE PATIENT:

Take a set of vital signs then turn up the oxygen to 15L/min (if not at 15L/min already) for the duration of the procedure.

4) TURN THE PATIENT:

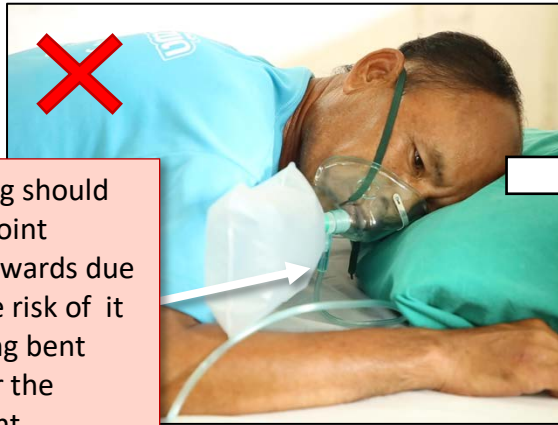
With two members of staff present, lay the bed flat. Ask the patient to turn themselves onto their tummy and position themselves however feels most comfortable. Support them to turn over. Position a first pillow under their chest or chest and abdomen (depending on patient preference and habitus) and a second pillow or a rolled towel under their forehead. This will leave a gully for the reservoir bag of the oxygen mask to be fully inflated whether the head is straight or to the side. Ask the patient to orient their head in whatever position they find most comfortable.





5) ADJUST THE OXYGEN:

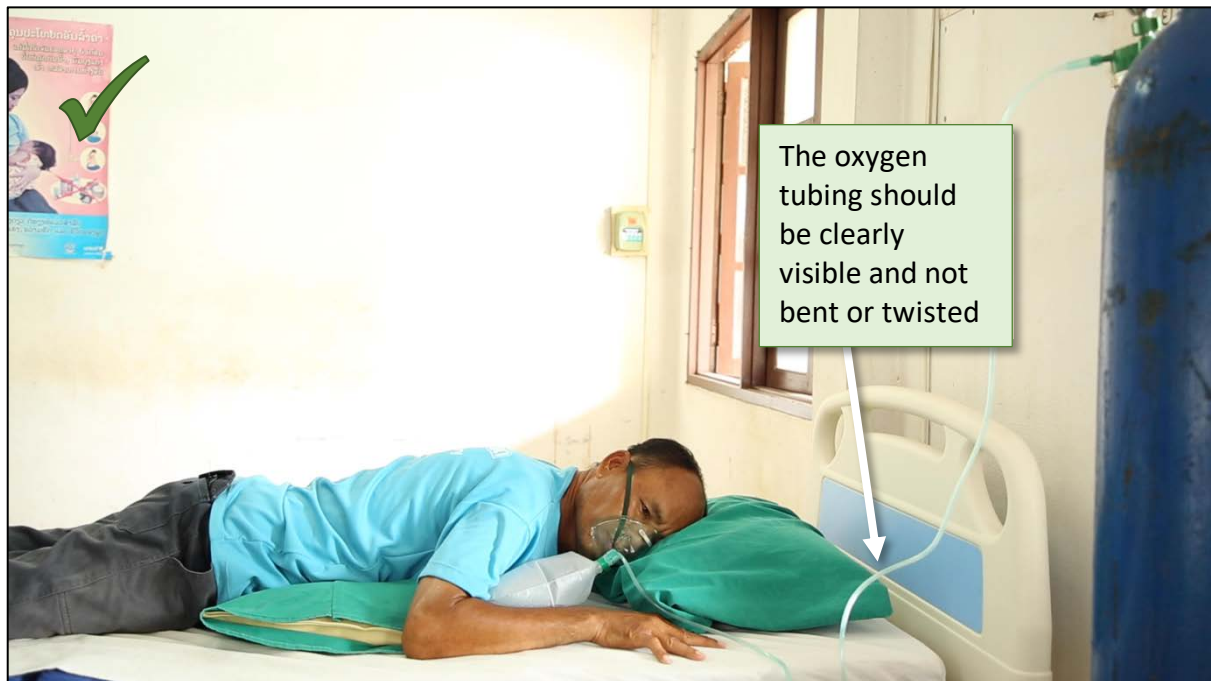
Adjust the tubing of the reservoir mask so it points directly towards the oxygen source and is not caught underneath the patient. Make sure the mask is not being pushed against the patient's face.



Tubing should **not** point downwards due to the risk of it getting bent under the patient



Tubing is now correctly pointing towards oxygen source



The oxygen tubing should be clearly visible and not bent or twisted



6) PREVENT PRESSURE SORES:

Position the remaining pillows and other bedding to minimise pressure on the limbs and to make the patient as comfortable as possible. The knees should be slightly flexed and the arms supported at a comfortable angle. Ask them what position is most comfortable for each limb. Plastic gloves filled with water can also be used to support limbs.

The patient's arm should not rest on the hard metal bed frame – it needs padding underneath



Removing the foot of the bed can also be helpful. Encourage the patient to reposition themselves when required or to call for help when they feel uncomfortable.

Remove the foot of the bed and place a pillow under the lower legs to reduce pressure on the knees and feet





7) RECHECK THE PATIENT:



Recheck the blood pressure, heart rate, respiratory rate and oxygen saturations. If possible, return the oxygen flow to whatever it was pre-proning, aiming for oxygen saturations of 90 – 96%.

8) MONITOR THE PATIENT:

- Keep continuous pulse oximetry in place if possible.
- Give the patient some means to summon help if necessary (emergency buzzer, mobile phone, improvised rattle).
- Make sure a member of staff is always nearby when a patient is in prone position.
- Ask the patient to remain in this position as long as tolerated.
- Can alternate with a lateral position or supported upright in bed.