

PROCEDURE SAFETY CHECKLIST

BEFORE THE PROCEDURE	TIME OUT Verbal confirmation between team members before start of procedure	SIGN OUT
Have all members of the team introduced themselves?	Minimum of 5 people plus 1 for airway	ETT length at teeth/capnography
Consultant/Senior nurse aware	All team members aware of role	Monitoring re-established
Any contraindications	Appropriate ventilator settings. FiO2 set to 1.0	Ventilator settings reviewed
Re-intubation equipment available	Cardiovascular stability- remove ECG electrodes	Lines secured
Eyes taped and lubricated	Adequate sedation (i.e. RASS -5)	Chest drains remain below patient
ETT tied (ETT anchor devices removed). Ensure tube connections secure.	Adequate muscle relaxation – consider need for bolus	Slide sheet removed and reverse Trendelenburg 30°
Stop NG feed and aspirate NGT	Pillows positioned correctly – chest, pelvis, knees	NG position confirmed and resume enteral feed
Non-essential monitoring + infusions discontinued.	Team members familiar with procedure	Carefully position arms into swimmers position as detailed in proning guideline
Adequate length on remaining lines going either up or down bed	Concerns?	Pressure areas checked:
Chest drains below patient and a staff member allocated to spot through the manoeuvre		<ul style="list-style-type: none"> • ETT not pressing against lips • No pressure on eyes • Ears not bent over • NG not pressed against nostril • Penis between legs + urinary catheter secured • Lines / tubing not resting against skin
Assess skin integrity- document if required		Pillows positioned correctly at chest, pelvis and lower legs
Equipment available as per guideline e.g. pillows and head support		Prolevo boots positioned under knees
Concerns?		Concerns?

POST PRONING CHECKLIST
To be performed after each head/arm position change (2-4 hourly)

Area	Check Point
Head/Face	Check ETT/tracheostomy is accessible/not kinked – note ETT cm at teeth
	All connections between ETT and ventilator circuit secure
	Note ETT/tracheostomy cuff pressure
	ETT positioned so not compressing lips
	Tubular sponge (or similar) placed between ETT ties and patient's skin
	Confirm ears are not bent over
	Perform ETT/tracheal suctioning immediately post proning
	Eyes taped shut
	No direct pressure on the eyes
	Ensure 30° foot down positioning (reverse Trendelenburg)
	NG tube not causing pressure to nostril
	NG tube secure and not displaced
Neck	Verify that patient's lower back and neck are not overly extended or flexed
	Front of neck free from compression
	Central line secure
Chest	Chest drains patent
	Chest pillow central and allowing shoulder shrug
	Breasts supported and free from pressure
Abdomen	Abdomen free
Pelvis	Pelvis support cushion in place/genitalia cells deflated
	Male genitalia positioned between legs
	Catheter tubing is free and between legs
Arms	Shoulders not abducted beyond 70°
	No compression over elbows and elbows adequately cushioned
	Wrists in neutral position
	Hands free
	Alternate Swimmers Position 2-4 hourly
	No peripheral IV lines under patient
Legs	Prolevo boots positioned under knee/lower limbs
	Pillow under lower legs so ankles in neutral position
Infusions/Monitoring	All monitoring recommenced
	All infusions connected and infusing
	Check CRRT lines patent
	ECG leads not underneath patient
	Ensure patient is well sedated and pain free
	Infusion lines not resting on patient's skin
	Mattress is in static mode
	Check ABG 20-30 mins post prone positioning
Final position check to avoid neuropathies	<ol style="list-style-type: none"> Shoulders fall slightly forward of the anterior capsule of shoulder joint Arm abducted to 45-70 degrees Knee supported with Prolevo boot

