

# Sage AirTAP<sup>®</sup> LC

## Lift Compatible Patient Repositioning System

### Competency skill checklist



<b>Name:</b>
<b>Date:</b>

Always read and strictly follow the Sage AirTAP LC operator’s manual before using the device. Consult the operator’s manual for a complete list of warnings and cautions.

#### Warnings:

- Do not use on patients with thoracic, cervical, or lumbar fractures that are deemed unstable unless stabilization is used or a clinical assessment of the risks has been performed.
- Only use this product with adult patients.
- Do not use Air Pump/Booster Pump during lift transfers.
- Never leave a patient unattended while the Lift Compatible Glide Sheet (“The Glide Sheet”) is inflated or the Air Pump/Booster Pump is powered on.
- Do not use the Glide Sheet with a hanger bar that is designed for a clip attachment.
- Always ensure the patient is centered on the Glide Sheet before inflating.
- To avoid potential skin injury, prevent patient’s heels and head from dragging across the bed during repositioning. Refer to your facility’s skin injury and prevention protocol and the National Pressure Injury Advisory Panel (NPIAP) Guidelines.
- Always ensure straps are untucked before transferring a patient.
- Always ensure the Sling Straps are not twisted and are properly attached to the lift(s).
- Never leave a patient unattended while the Glide Sheet is attached to a lift.
- Always use more than one trained healthcare provider to laterally transfer, vertical lift transfer, or reposition a patient to avoid the risk of healthcare provider injury. Note: Exterior bed rails on both surfaces should be raised prior to transfer to prevent the patient from falling. The healthcare providers are responsible for ensuring the patient’s body does not extend beyond the boundaries of either support surface.

Prior to use	Completed	Comments
1. Performs a visual inspection of the system.		
2. Ensures Wedges, M <sup>2</sup> Microclimate Pad, AirTAP LC Glide Sheet, and the Air Pump/Booster Pump are present and in place for proper use.		
Set up the AirTAP LC System	Completed	Comments
3. Ensures all side rails are up and brakes are locked.		
4. Ensures the patient’s support surface is horizontal and at the healthcare providers’ waist level.		

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5. Demonstrates placing the folded AirTAP LC Glide Sheet on the mattress just below the headboard with the printed arrow pointing toward the head of bed.		
6. Demonstrates unfolding the AirTAP LC with M <sup>2</sup> Body Pad.		
7. Demonstrates centering the patient on the AirTAP LC with the head and foot and center markings.		
<b>Supine lift transfer</b>	<b>Completed</b>	<b>Comments</b>
8. Verbalizes the importance of having a minimum of two caregivers to perform a supine lift transfer, with outer side rails up on sending and receiving surfaces.		
9. Performs check to ensure brakes are locked on both beds.		
10. Demonstrates the adjustment of bed height to promote proper body mechanics.		
11. Identifies and verbally confirms that the hanger bar attached to the lift is set up in accordance with lift manufacturer specifications and hospital protocol and that it has hooks, <b>not clips</b> , to support the AirTAP LC sling straps.		
12. Verbalizes and demonstrates attaching the two top sling straps labeled "Supine" to hooks on the hanger bar; ensures they match.		
13. Demonstrates use of the two black middle straps attached to the top hooks.		
14. Demonstrates attachment of the two black bottoms straps to the bottom hooks.		
15. Communicates to care team that brakes are locked, outer rails are up, and care team is ready to initiate vertical lift, then elevates patient above the support surface.		
16. Understands and ensures that the facility's transfer procedure to the receiving surface is followed.		

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17. Confirms patient is centered on the receiving surface.		
18. Demonstrates lowering patient to bed, removing the six sling straps from the hanger bar hooks once the straps are no longer in tension, and tucking the straps out of the patient's reach.		
19. Confirms patient is centered on the Glide Sheet.		
<b>Upright 1 or Upright 2 or Reclined: seated lift transfer</b>		
20. Verbalizes the need for a minimum of two caregivers to perform a vertical transfer to the chair, ensuring that the appropriate side rails are up and that the chair is properly positioned for safe placement of the patient per unit protocol.		
21. Performs locking of brakes on both the bed and chair.		
22. If needed, max inflates the surface, elevates the head of bed, and raises knees per protocol.		
23. Identifies and verbally confirms that the hanger bar attached to the lift is set up in accordance with lift manufacturer specifications and hospital protocol and that it has hooks, <b>not clips</b> , to support the AirTAP LC sling straps.		
24. Verbalizes and then demonstrates attaching and matching the top two sling straps labeled either "Upright 1," "Upright 2," or "Reclined" to the lift hanger bar hooks.		
25. Described why the upper sling straps must match on the right and left side.		
26. Demonstrates use of the two black middle straps attached to the top hooks.		

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<p>27. Demonstrates how to match and attach the appropriate set of bottom sling straps to the lift hanger bar hooks based on desired knee elevation:</p> <ul style="list-style-type: none"> <li>• <b>Black</b> bottom sling straps provide the <b>lowest</b> knee elevation</li> <li>• <b>Gray</b> bottom sling straps provide <b>low</b> knee elevation</li> <li>• <b>Blue</b> bottom sling straps provide <b>high</b> knee elevation</li> <li>• <b>Gold</b> bottom sling straps provide the <b>highest</b> knee elevation</li> <li>• Note: Ensure the patient’s knees are elevated above his or her hips during lift</li> </ul>		
<p>28. Demonstrates the importance of engaging the chair brake locks, reclining the chair slightly, and being prepared to put the footrest up slightly once patient is positioned in the chair per protocol.</p>		
<p>29. Demonstrates the transfer of the patient to the receiving support surface using the lift and following your facility’s procedure.</p>		
<p>30. Understands the importance of lowering the surface/chair rails per unit protocol.</p>		
<p>31. Demonstrates the removal of all six sling straps from the hanger bar hooks once the straps are no longer in tension and tucking the straps out of the patient’s reach.</p>		
<p>32. Ensures safe placement of the patient to the center of the chair (onto the Seated Positioning System, if applicable) and comfortably positions the patient per the sitting protocol.</p>		

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Employee signature

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Observer signature