Technical Section

TECHNICAL NOTES & TIPS

TECHNICAL NOTES

Use of a modified Bradford sling for the positioning of orthopaedic patients

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BACKGROUND

Intra-operative positioning is defined as the art of safely securing patient anatomy in order to gain optimal surgical field exposure with minimal compromise of the patient's physiological functions.¹

We describe a simple method of using a modified Bradford sling to manipulate the arm of orthopaedic patients in the lateral position which protects the brachial plexus and provides excellent access for anaesthetists.

TECHNIQUE

1. Hold both corners of the closed end of a pillow-case.
2. Take hold of both sides at the mid-point of this short axis and pull apart creating a diamond shape as demonstrated (Fig. 1).
3. Invaginate the corner closest to you until it lies inside the opposite corner. The resulting concavity will accommodate the patient's elbow (Fig. 2).
4. Oppose the corners of the open end of the pillow-case to create a 'gutter' for the forearm (Fig. 3).
5. This 'gutter' can be used to position the arm accurately whilst in the lateral position; the free end of the sling may be secured to the bed, or simply to the patient's back, with tape (Fig. 4).

DISCUSSION

As well as reminding the reader how to fashion a Bradford Sling from a pillow-case, we find this simple method accurately positions the free arm of a patient when in the lateral position. It is particularly effective in preventing contamination of the operative field when operating on the other arm, e.g. olecranon fracture.

Reference

1. McEwen DR. Intraoperative positioning of surgical patients. *AORN J* 1996; **63**: 1058–79.