

PROTOCOL FOR: Lithotomy Position: Delivery Room

CLINICAL
ASSESSMENT
AND CARE:

1. Patients undergoing a D & C or during some vaginal deliveries will be placed in a lithotomy position.
2. Assess if patient has areas of limited range of motion of joints before placing her in lithotomy position.
3. Assess patient's skin integrity before placing her in lithotomy position and at least every 2 hrs.
4. Assess patients physical and mental ability to understand and/or assist with positioning.
5. Assist patient with positioning.
6. Legs should be raised and lowered simultaneously to allow body to adjust to changes in circulatory blood volume and to prevent torsion injuries to the ligaments of the lower spine.
7. Care should be taken to externally rotate the hip before abducting the leg.
8. Legs and feet should be supported by the stirrup portion of the bed. The patient's buttocks should remain on the bed.
9. Notify physician of any:
 - a. Reddened or blanched areas.
 - b. Blistered or broken areas.
 - c. Tingling or pain in joints.

DOCUMENTATION: Document any reportable conditions on Nursing Operative Record or flowsheet.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 2/94

REVISION DATES: 3/97, 9/00