

**Dragon, Karen E. (CDC/NIOSH/EID)**

---

**From:** mullerd@  
**Sent:** Friday, May 19, 2006 10:18 AM  
**To:** NIOSH Docket Office  
**Cc:** Doyle, Glenn (CDC/NIOSH/EID); Chen, Jihong (Jane) (CDC/NIOSH/EID) (CTR)  
**Subject:** 072 - Patient Handling Comments

Name  
Don Muller

Organization  
South Muskoka Memorial Hospital

Email  
mullerd@look.ca

Address  
75 Ann St  
Bracebridge, Ont P1L 2E4  
Canada

Comments

My name is Don Muller and I'm a general physiotherapist at a community hospital. I enjoyed watching the video on safe patient handling and movements. You asked for feedback to the draft but let me also explain my perspective. With the main goal of people returning home I'm given the task of transferring patients which nurses feel are "unsafe" 1. The video never mentions pre admit mobility (and the example of Fred V will put this man in a lift for life when it isn't necessary). Clinical judgement to sit at the edge of bed and attempt slight weightbearing will determine if he's cooperative prior to using the lift. 2. I feel it's a bit of fear factor comparing nurses to warehouse workers with lifting restrictions...I don't dispute we have unpredictable "loads" but boxes do not have legs and arms to assist with transfers. 3. Gait belts? Do they reduce injury or instil false security because if a patient buckles there is a highprobability of injury to a nurse who attempts to hold them up. 4. Algorithms come from nursing home perspective which doesn't always translate to acute care. Thanks for your time and if you'd like further information or clarification I can be reached at or 705-645-4400 x140 Sincerely Don Muller PT