

The 30° Tilt

Patient and carer information

Tissue Viability Service

- A simple safe and easy way to provide pressure area distribution, without lifting.
- Safe and comfortable for patients and carers.

Diagrams provided courtesy of Invacare



The Patient Information Leaflets page on the Trust website is available on the link: https://www.wwl.nhs.uk/patient-information-leaflets or scan the QR code.

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Recumbent Position

1.



Use one or two pillows to support the head and neck.

2.



The carer rolls the patient towards her/him. The first pillow is placed underneath the head. The second pillow at an angle to fit the small of the back. This will 'tilt' the patient onto one buttock and lift the sacrum clear of the mattress. Gently roll the patient onto the pillows.

Ensure there is clearance between the sacrum and the mattress, checking with your flattened hand - you should be able to easily put your hand in the slight gap created.

3.



Support the full leg along the length of another pillow.

Ensure the pillow is moulded around the leg and that the heel overhangs the edge of the pillow.

4.



The third pillow is now used simply to fill any unsupported areas over the length of the other limb. The gaps to be filled are usually behind the knee and around the Achilles tendon. The edge of the pillow, about 1" depth, is all that is normally required. However, if the limb is preferred to be flexed, then a thicker pillow may be required to ensure full limb support.

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The full recumbent 30° 'tilt' position.



This demonstrates the necessity to use an additional pillow to provide support to the feet.

Using the knee-breaks on the bed can also help with this and can make the patient more comfortable.



Variant position

Alternative position, for patients who cannot achieve or maintain normal posture.

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Semi-Recumbent Position



Supports the lumbar spine.

Plump or fold the lower pillow, if necessary.

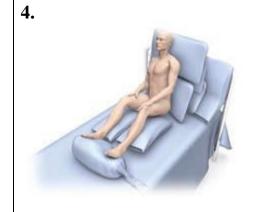


An additional pillow is positioned under the buttock to 'tilt' the body, giving clearance to the bony areas (ischial tuberosities) and the sacrum.



Ensure that the heels are clear of the mattress.

Use the knee-break in the bed.



The full semi-recumbent 30° tilt' position.

Do not forget to use the knee-break on the bed rather than a pillow.

Further protection to vulnerable heels and elbows can be provided by the use of padded boots/ gel heel pads.

The provision of a bed cradle will help to reduce additional pressure on the feet, caused by the weight of some bedclothes.

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Please use this space to write notes or reminders.

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Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

- 1. What are my options?
- 2. What are the positives and negatives of each option for me?
- 3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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