

Policy code	CPP_TR_STCC_0416
Date	April, 2016
Purpose	To ensure a consistent procedural approach to the stretcher – CombiCarrier [®] II.
Scope	Applies to Queensland Ambulance Service (QAS) clinical staff.
Health care setting	Pre-hospital assessment and treatment.
Population	Applies to all ages unless stated otherwise.
Source of funding	Internal – 100%
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Review date	April, 2019
Information security	UNCLASSIFIED – Queensland Government Information Security Classification Framework.
URL	https://ambulance.qld.gov.au/clinical.html

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Stretcher – CombiCarrier®II

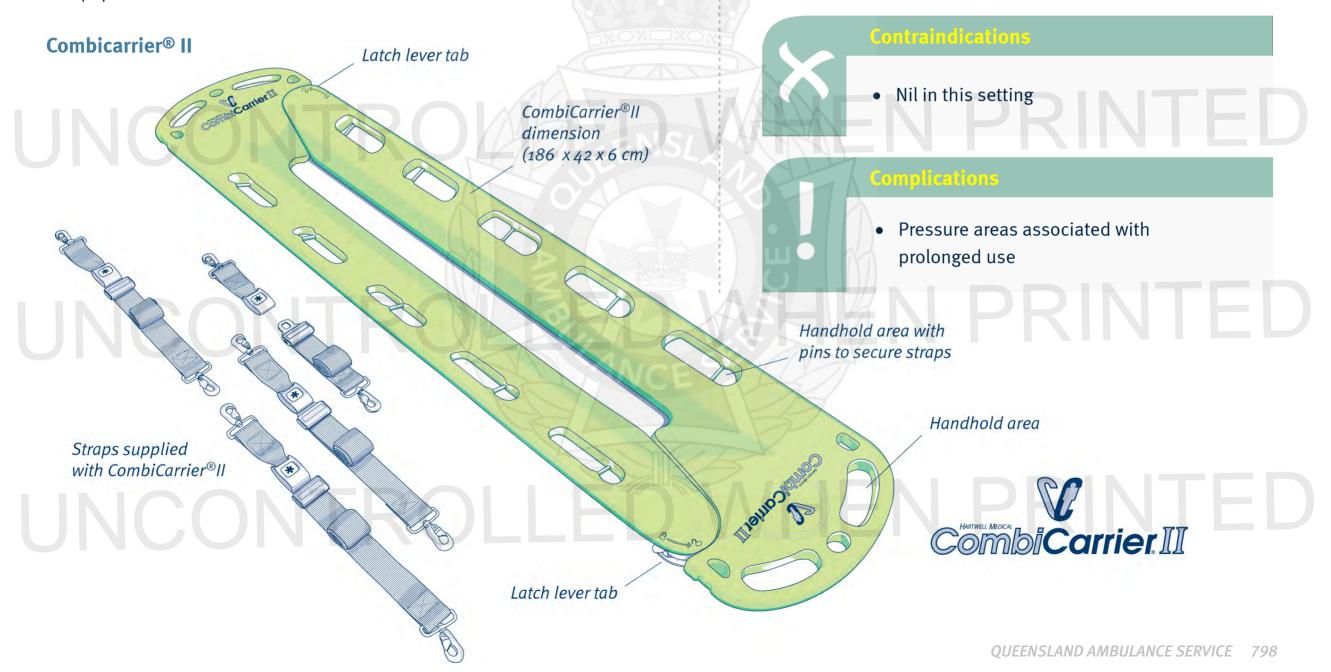
April, 2016

Patient extrication

Patient transfer

The CombiCarrier® II has been designed for use in extrication of patients while assisting in maintaining immobilization.

The CombiCarrier[®] II is a sturdy piece of equipment, weighing 7.1 kilograms with a load capacity of 205 kilograms. The CombiCarrier[®] II is a versatile piece of equipment and can be useful in situations such as road traffic crashes.^[1,2]



Procedure – Stretcher CombiCarrier®II

5°max

15°max

15°max

Maximum 15° role

 Lay the CombiCarrier®II down next to the patient, aligning the top of it to the patient's head.

3 Grasp each side of

2

There are two latch lever

to be separated into

two pieces.

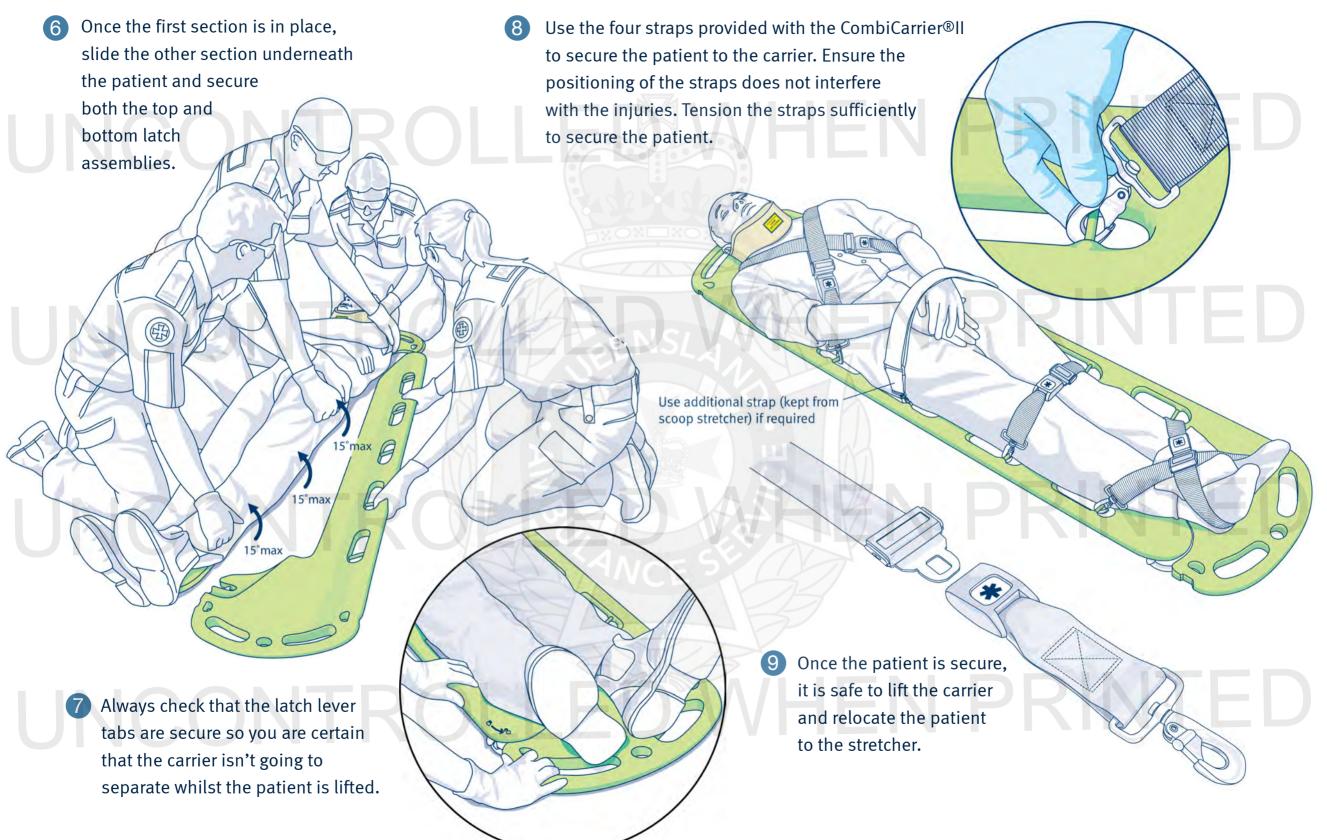
tabs that allow the carrier

the carrier and pull back on the first latch lever tab, separating the top end of

a

the carrier, then repeat, to separate the opposite end.

- One officer is to provide c-spine immobilisation whilst supporting the patient head. During a coordinated approach, gently roll the patient 15 degrees (maximum).
- 5 Slide one half of the carrier underneath the patient. You may need assistance lifting the patient's shoulders and hips if the carrier section won't slide under smoothly.



Procedure – Stretcher CombiCarrier[®]II

Normal patient

Additional information

Use additional straps (supplied with the CombiCarrier®II) if required, and ensure that the positioning of the straps does not interfere with injuries. Tension the straps sufficiently to secure the patient. It is recommended however, that 5 straps be utilised with one strap securing the feet. This ensures that the patient is secure in non-horizontal alignments such as an extrication down a set of stairs, or over sloping terrain. In such instances the officer at the foot of the carrier must closely monitor the foot strap to ensure it is it positioned under the arch of both feet and is in no danger of slipping off the feet. If for clinical or load bearing reasons it is deemed more appropriate to carry a patient HEAD FIRST down a slope or stairs, the cross strapping configuration across the patient's chest will prevent the patient from sliding down the stretcher.

