Clinical Practice Procedures:
Trauma/Stretcher – CombiCarrier®II

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Date        April, 2016
Purpose     To ensure a consistent procedural approach to the Stretcher – CombiCarrier®II.
Scope       Applies to all QAS clinical staff.
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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]

### Indications
- Patient extrication
- Patient transfer

### Contraindications
- Nil in this setting

### Complications
- Pressure areas associated with prolonged use

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**Figure 3.96**

*Combicarrier® II Stretcher – CombiCarrier® II*
1 Lay the CombiCarrier® II down next to the patient, aligning the top of it to the patient’s head.

2 There are two latch lever tabs that allow the carrier to be separated into two pieces.

3 Grasp each side of the carrier and pull back on the first latch lever tab, separating the top end of the carrier, then repeat, to separate the opposite end.

4 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

6 Once the first section is in place, slide the other section underneath the patient and secure both the top and bottom latch assemblies.

8 Use the four straps provided with the CombiCarrier®II to secure the patient to the carrier. Ensure the positioning of the straps does not interfere with the injuries. Tension the straps sufficiently to secure the patient.

7 Always check that the latch lever tabs are secure so you are certain that the carrier isn’t going to separate whilst the patient is lifted.

9 Once the patient is secure, it is safe to lift the carrier and relocate the patient to the stretcher.
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 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.