Key Steps — Patient positioning — the core positions

RegisteredNurseRN's positioning reference lecture. The checklist names each position it teaches and how it is set up.

- [ ] 1. Start with the goal: the right position supports breathing, circulation, comfort and skin protection — choose it for the patient's condition and the care being given.
- [ ] 2. Supine: flat on the back, head and shoulders supported by a pillow and arms resting supported — the baseline position for rest and many assessments.
- [ ] 3. Fowler's positions: sitting up in bed — semi-Fowler's at a lower head-of-bed angle, high Fowler's near upright — to ease breathing and for eating and conversation; bend the knees slightly to stop the patient sliding down.
- [ ] 4. Lateral (side-lying): the patient on their side with pillows behind the back, between the knees and under the top arm — a mainstay for pressure relief and rest.
- [ ] 5. Sims' (semi-prone): a three-quarter turn toward prone with the top leg flexed forward — used for comfort, drainage and some examinations and procedures.
- [ ] 6. Prone: face down with the head turned to one side and the body supported with pillows — used deliberately in specific care plans, with close monitoring.
- [ ] 7. Dorsal recumbent: on the back with knees bent and feet flat — the working position for many bedside procedures.
- [ ] 8. Whichever position you choose: keep the body in good alignment, pad bony prominences, and check the skin at pressure points before you leave.
- [ ] 9. Reposition on the schedule set by the patient's risk assessment, and document every position change.

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Steps summarise this demonstration for education and do not replace your institution's protocol, which always governs. Content reviewed by Dr. Mohamed Ibrahim, MD, PhD — physician-scientist. October 2026.