

**XXX HOSPITAL**

**DEPARTMENT POLICY**

**TITLE:       TRAUMA: PELVIC BINDER GUIDELINE**

**Date Adopted: XXXX**

**Date Revised:**

**Supersedes:**

**Date Reviewed: XXXX**

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**DISTRIBUTION:**

Emergency Department, ICU

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**PURPOSE:** XXX Hospital trauma center strives to provide the highest level of care possible to orthopedic trauma patients.

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**POLICY:** Patients presenting to XXX Hospital with pelvic injuries will be provided with pelvic stabilization as needed.

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**PROCEDURE:**

The pelvic binder should be placed on patients at high risk for mortality.

- a. Pelvic fracture patients who are hemodynamically unstable.
- b. Elderly patients with pelvic fractures
- c. Patients with high energy fracture patterns

Pelvic binders can be used on all pediatric patients

1. Physician will diagnose an unstable pelvic fracture
2. Physician or designee will apply pelvic binder.
3. Follow instructions below
4. Binder is radiolucent so it will not interfere with radiological procedure

**TITLE: Pelvic Binder**

**Date Adopted: XX**

**Date Revised:XX**

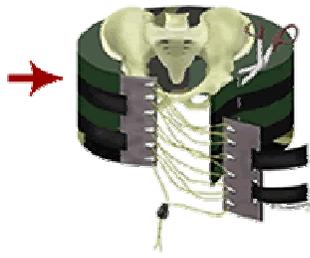
**Supersedes:**

**Date Reviewed: XX**

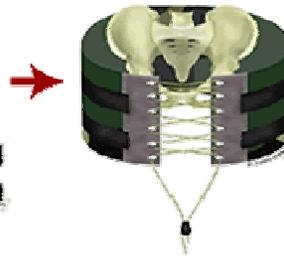
**Instructions**



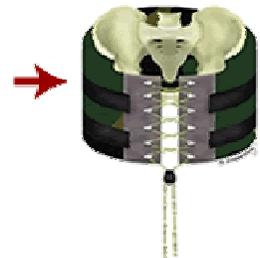
**Step 1** - Slide binder under supine patient. Center binder over greater trochanters.



**Step 2** - Trim free end of binder to leave 6 - 8" gap.



**Step 3** - Attach velcro straps and plate to free end of binder.



**Step 4** - Tighten shoelace mechanism and close fastener to create snug fit.

**Nursing care:**

1. Perform skin assessment under the binder per hospital protocol.
2. Binder can be loosen and retighten to gain access for procedures.
3. Binder can be cleaned if needed. For one patient use only.

**REFERENCES:**

Pelvic Binders, Inc.

Trauma Nursing Core Course, 7<sup>th</sup> edition, Emergency Nurses Association, 2014.

Advanced Trauma Life Support Course, American College of Surgeons, 9<sup>th</sup> Ed, Chicago, IL, 2012

**Approval:**

\_\_\_\_\_  
Urgent Care Services Director

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Date

**TITLE: Pelvic Binder**

**Date Adopted: XX**

**Date Revised:**

**Supersedes:**

**Date Reviewed: XX**

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\_\_\_\_\_  
Medical Director Trauma Services

\_\_\_\_\_  
Date

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Emergency Department Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Trauma Coordinator

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Date