

## **BED MAKING**

### **PRINCIPLES OF BEDMAKING.**

- Systematic way of doing saves time, energy and material.
- Good body mechanics maintains the body alignment and prevents fatigue.
- A safe and comfortable bed will ensure rest, sleep and prevents several complications in bedridden patient, e.g. pressure sore, foot drop, etc.
- Microorganism are found everywhere on bed, bed sheets, blanket, pillow cover and the articles used by the patient and in the environment. Keep the bed and environment clean and neat. it helps to provide physical and mental health.

### **BED APPLIANCES/ACCESSORIES**

#### **1. Mackintosh or plastic sheet**

##### **Purpose**

- To protect the bottom sheet
- To protect the pillow
- To protect the bed clothes during a procedure

#### **2. Backrest**

##### **Purpose**

- To help the patient sit upright in bed. Different degrees of elevation can be made.

#### **3. Fracture board**

##### **Purpose**

- Placed directly under the mattress to provide a firm support

#### **4. Hot water bottles**

These are rubber bottles

##### **Purpose**

- To give added warmth to the patient
- To help in relief of pain
- To relieve retention of urine

**Note:** - the hot water bottles must always be covered during its use and never placed directly against the patient's skin.

#### **5. Bed cradle**

##### **Purpose**

- To keep the weight of bed clothes off the patient's body

#### **6. Bed – block/ elevator**

Bed – blocks are made of wood and bed elevators are made of metal.

##### **Purpose**

- To elevate the top or bottom of the bed

#### **7. Air ring**

##### **Purpose**

- To prevent friction

#### **8. Foot rest**

##### **Purpose**

- To prevent foot drop

## **9. Over bed table / cardiac table**

### **Purpose**

A mobile table drawn up in front of the patient for meals or medicines or to put pillows on for the patient to breathe more easily when sitting forward.

## **10. Side rails**

### **Purpose**

- These are protective barriers attached to the bed as a safety measure.

## **11. Sand bags**

This is a bag filled with sand

### **Purpose**

- To prevent movement of a limb in the treatment of special conditions

All patients in hospital have their beds made at least once a day and more oft if their nursing care demands it. E.g. whenever the bed gets soiled. For example unconscious patients who are incontinent need their beds made each time the linen becomes soiled.

Bed making is like any other procedure and so have aims and rules for carrying it out.

## **AIMS**

- The main aim of bed making is to provide comfort and safety to the patient
- For the neat and clean appearance of the ward
- To provide cleanliness and neatness of the bed itself
- To provide a suitable position for the patient according to their condition
- To avoid conditions that would result as a complication of poor nursing care
- To improve nursing care standards of hygiene and general care

## **RULES OF BED MAKING**

1. Full attention to the patient
  - a) Speak to the patient and not with your fellow nurse unnecessarily
  - b) Close the windows to protect the patient from draught on a cold day
  - c) Screen the bed so that he is not exposed unnecessarily and close the ward to visitors
2. The bed has to be made comfortable, neat and clean
  - a) Sheets have to be smooth on the bed, crumbs should be removed, soiled linen taken away
  - b) The patient must be made comfortable resting on pillows
3. The bed has to be made in such a way that complications as a result of bad nursing are avoided.

- a) Foot rest, air ring, bed cradle & the correct setting of the pillows can prevent those complications
- 4. Hygiene
  - a) Always use clean linen and beddings for each new patient
  - b) Avoid cross – infection by:-
    - i. Washing hands after making of beds of infectious patients or those with septic lesions and on completion of bed making
    - ii. Do not put any linen on the next patients bed
    - iii. If linen is dropped on the floor it should not be used.
    - iv. Use the dirty linen container for dirty linen. Never put it on the floor
    - v. Do not make a bed when sterile procedures are in progress in the ward.
- 5. Protecting beddings
  - a) Put all linen from an infectious patient to soak in a disinfectant first e.g. izaal 1:300 for 2hrs
  - b) Use a large mackintosh for incontinent patients
  - c) Use a small mackintosh at the head of every unconscious or post – operative patient
  - d) Use a bed cradle over leaking wounds

### **PROCEDURE FOR BED MAKING**

1. Close the ward for routine bed making and screen the bed.
2. Have everything ready before starting to make a bed. If necessary close the windows
3. Always work from the top of the bed except when putting on the counterpane
4. Never let the pillows or bed clothes touch the floor
5. Do not cover the patients face or mouth with bed clothes
6. Change all or part of the linen if necessary when turning in bed clothes, mitre the corners
7. Soiled linen must be put in a soiled linen container. Never put it on the floor
8. Do not shake the pillows over the patients bed
9. Keep the patient covered. Never expose him or her to draught especially a patient with high temperature.
10. Some patients who are nursed in special positions may not be laid flat for bed making. These patients must be lifted up and down the bed and supported by a nurse while the bed is being made.
11. If the patient is in bed for a longtime, it will be necessary to change the bed and mattress. Bring a clean bed & mattress with the bottom sheet, draw sheet & draw mackintosh in place, alongside the patient's bed.
12. Lift the patient on the clean bed; put the bed in the proper position and replace the top bed clothes.

### **EQUIPMENT REQUIRED TO MAKE A HOSPITAL BED**

- Hospital bed
- Spring cover
- Mattress
- 2 bed sheets
- 1 mackintosh

- 1 draw sheet
- 1 pillow & pillow cover
- 1 blanket
- 1 bed cover or counter pane
- 2 chairs for stripping the bed

### **APPLIANCES FOR A HOSPITAL BED**

- Foot rest
- Back rest
- Bed blocks or bed elevators
- Bed cradle
- Fracture boards

### **MAKING AN UNOCCUPIED BED**

- a) Collect all equipment needed
- b) Untuck all the beddings first
- c) Take away the pillows
- d) Fold the bed cover, blanket and top sheet in three with the bottom part first on top and put on the chairs provided one by one.
- e) Take away the draw sheet and mackintosh and place on chairs. The bottom sheet is folded, in three, bottom part first as the top will be tucked in first when putting on again.
- f) If there is a long mackintosh, it is rolled and removed.
- g) Turn the mattress [if possible] and see that the spring cover is straight
- h) Replace the mackintosh and bottom sheet and start to tuck in [see that the right side is up].
- i) Replace the draw mackintosh at the height of the patient's buttocks. The draw sheet should cover the draw mackintosh completely.
- j) Put on the top sheet and blanket separately, tuck in from bottom first. Mitre each corner
- k) Turn back the top sheet over the blanket and bed cover at the top.
- l) Return the pillows to the bed[open ends away from the ward entrance] after shaking them
- m) Replace the bed cover, tuck in at the bottom and leave the sides hanging down, but cover the whole bed with it.

### **OCCUPIED BED**

[When the patient is allowed out of bed]

Make the bed in the same way as above except for the bed cover over the blanket back, and fold the top sheet back over the bed cover.

Fold half of the bed clothes back at an angle of 90<sup>0</sup> at the side of the locker, so that it is easy for the patient to get into the bed.

### **ADMISSION BED**

Requirements in addition to a hospital bed

- 2 admission sheets

### **METHOD**

1. Admit the patient in a clean bed
2. Open the bed by:-
  - a) Turning back the bed cover
  - b) Turning back the sheet and blanket at the bottom
  - c) Un tuck one side and roll the beddings to the other side.
3. Put the admission sheets on top of the bottom sheet and put the patient in between
4. Admit your patient in between sheets after the bed bath has been given

### **POST – OPERATIVE BED**

#### **METHOD**

1. Take off the beddings in the usual way
2. Put all linen in the dirty linen container
3. Make the bed with clean linen
4. Instead of the pillows put the protective mackintosh and towel across the top of the bed and tuck in at the top.
5. Fold both sides of the bed clothes into a neat packet which can be easily removed when lifting the patient on to the bed.

### **TO CHANGE THE BOTTOM SHEET FROM SIDE TO SIDE**

This method of changing the bottom sheet is used for most patients in hospital

#### **REQUIREMENTS**

- 1 sheet
- 1 draw sheet
- Soiled linen container
- 1 draw mackintosh
- 2 chairs

[Requirements for treating the pressure areas may also be required]

## **METHOD**

1. Close the windows if necessary. Screen the bed if the ward is not closed.
2. Place the clean linen on the chairs at the foot of the bed and the soiled linen container besides
3. Fold the clean sheet length wise and put it on the chairs
4. Strip the top bed clothes as usual leaving the patient covered with the top sheet on a hot day, sheet and blanket on a cold day. Remove all but one pillow, if possible
5. Place the patients arm and legs in a position for turning, pressure areas may now be treated
6. The second nurse then rolls the draw sheet and mackintosh and then the bottom sheet closely up the patients back.
7. Straighten the mattress and mackintosh when present, put the clean sheet on, tuck in at the top side and bottom
8. Put the clean mackintosh and draw sheet in position and tuck them in at one side and then roll them up to the patients back.
9. Roll the patient over to the back put arms and legs in a position for turning and move the pillows as before
10. Roll the patient on to the other side, remove the soiled linen and put it in the soiled linen container. Pressure areas on this side are now treated.
11. Unroll the clean sheets, pull tightly and tuck in.
12. Roll the patient on to the back and make hi comfortable
13. Remove the blanket, if present, straighten the top sheet and replace the bed clothes
14. Remove the screens and dirty linen container

## **TO CHANGE THE BOTTOM SHEET FROM TOP TO BOTTOM**

This method is used for changing the patient's bottom sheet when the patient is nursed in the upright position and MUST not be laid flat. E.g. chronic heart disease

## **REQUIREMENTS**

- 1 draw sheet
- 1 sheet
- 1 draw mackintosh
- 2 chairs

## **METHOD**

1. Close the windows if necessary, and screen the bed if the ward is not closed
2. Place the clean linen onto the chairs at the foot of the bed and soiled linen container besides the chairs
3. Fold the clean sheet across the width in three
4. Strip the top bed clothes as usual, leaving the sheet covering the patient [blanket and sheet on a cold day]. Backrest. Air ring & foot support are removed
5. Both nurses lift the patient down the bed and off the draw sheet

6. One nurse supports the patient while the other removes the draw sheet & mackintosh & then rolls the soiled bottom sheet down up to the patients back, straightens the mattress and mattress cover & mackintosh. The same nurse puts on the bottom sheet, tucking it in at the top on her side, as far as the dirty linen. She then puts on the draw sheet & mackintosh
7. Replace the back rest, air – ring and foot rest. Treat pressure areas.
8. Both nurses lift the patient back up the bed, and make sure that the pillows are comfortable.then tuck in the draw sheet and draw mackintosh on the second side.
9. draw the soiled sheet to the bottom of the bed & from under the patients legs and put it in the soiled linen container.
10. With the hands brush out any crumbs & creases from the mackintosh if present & mattress and straighten them. Pull the clean sheet down the bottom of the bed and tuck in.
11. Put on the top bed clothes as usual.

NB. Some means should be used to prevent the patient in this position from slipping down thebed. This can be achieved by putting a sand bag or pillow with mackintosh cover against the feet [foot rest]. This will also prevent foot drop. Instead the foot of the bed may be raised on bed blocks / elevators.

### **BED FOR A PATIENT WITH DYSPNOEA**

Requirements additional to hospital bed

- Back rest
- Pillows [at least4] and pillow cases
- Bed blocks or bed elevators
- Sand bags and cover may be necessary to support the feet. Or a foot support i.e. a board or pillow.

There should be a sputum mug on a locker placed so that the patient can reach it. When making the bed, take care to see that the patient's shoulders are covered, if possible.

It is better to use a bed blanket or shawl or small blanket as the bed clothes would be restricting.

Place the backrest and pillows so as to support the patient in upright position and use a bed elevator or bed blocks to prevent the patient from slipping down the bed. Place the sand bags against where necessary as foot support.

### **THE DIVIDED BED**

This bed may be used for patients who have had an amputation of the limbs or have fractured limb in extension or for pelvic examination or treatment.

**Requirements additional to the unoccupied bed.**

1 sheet.

1 blanket.

Make the bed up in two halves divided across the middle or for an amputation bed at the level of amputation, the top half having a sheet and blanket and bottom half, a sheet, blanket and counter pane when used.

For a bed of a patient with amputation of the leg, the following equipment will be needed in addition to the above.

2 sandbags in covers: a draw sheet or firm binder mackintosh and dressing towel.

Tourniquet and towel (only if ordered by the doctor in charge of the case).

### **Bed for complete rest.**

This is made as a hospital bed using one pillow only. The word "complete rest" are very important and mean exactly what they say. That is the patient is the patient must not be allowed to do anything at all for himself and must therefore be fed, turned over in bed washed, lifted on and off bedpans and rolled from side to side with the greatest care when the bed is made.

Examples of conditions in which this treatment is necessary are acute rheumatism and acute heart disease.

### **Plaster and fracture beds.**

#### **Requirements additional to hospital bed.**

- Fracture boards.
- Bed cradle.

These boards are made the same as the beds and their purpose is to make a firm surface for support. They are placed across under the mattress.