BED MAKING

Key Terms

Sphygmomanometer	Tachycardia	Tachypnea

BED MAKING

OCCUPIED, UNOCCUPIED, POST OPERATIVE AND CARDIAC BED MAKING

INTRODUCTION:

Nursing is a profession that requires extensive training in patient care and procedures. One of these tasks is learning how to make a bed properly, especially since beds are such an integral part of the patient's world while staying in the hospital. The routine to change an unoccupied bed is efficient and thorough, due to the volume of beds that need changing. Some patients may require an absorbent pad near the center of the bed. In that case, a smaller sheet called a draw sheet covers it and gets tucked in place.

BED MAKING:

The standard bed making in most medical settings are

- Occupied Bed Making
- Unoccupied Bed Making
- Post- Operative Bed Making
- Cardiac bed Making

DEFINITION:

Bed-making is the act of arranging the bed sheets and other bedding on a bed, to prepare it for use.

PURPOSE:

The purposes of bed making are as follows:

- To provide the clients with a safe and comfortable bed to take rest and sleep.
- To give to the unit or ward a neat appearance.
- To adapt to the needs of the client and to be ready for any emergency or critical condition of illness.

- To economize time, material and effort.
- To prevent bedsores.
- To observe the client, e.g., presence of bedsore, oral hygiene, client's ability of self-care etc., can be observed during bed making.
- To promote cleanliness.
- To establish an effective nurse-client relationship.
- To provide active and passive exercise to the clients.
- To help the relatives to learn to care for the sick at home.

PREPARING AN OPEN BED/UNOCCUPIED BED

DEFINITION:

A bed prepared to receive a new patient is an unoccupied bed.



Picture1: Unoccupied bed

PURPOSE:

- 1. To provide clean and comfortable bed for the patient
- 2. To reduce the risk of infection bymaintaining a clean environment

3. To prevent bed sores by ensuring there are no wrinkles to cause pressure points

EQUIPMENTS REQUIRED:

- ✓ Mattress
- ✓ Bed sheets: Bottom sheet
- ✓ Top sheet
- ✓ Pillow
- ✓ Pillow cover
- ✓ under pad
- ✓ Draw sheet
- ✓ Blanket
- ✓ Disinfectant solution
- ✓ Duster.
- ✓ Kidney tray
- ✓ Laundry bag or Bucket
- ✓ Trolley

PROCEDURE:

S.NO NURSING ACTION

- 1. Assess patient's general condition
- 2. Explain to patient the need and purpose for making bed and how he has to cooperate.
- 3. Assess whether there is need for change of linen and collect fresh linen as needed
- 4. Provide privacy
- 5. Move furniture away from the bed

RATIONALE

Determines if patient can be made to sit out of bed.

Wins the patient's co-operation approach towards carrying out procedure.

Ensures an organized approach towards carrying out pocedure.

Provides adequate space for nurse to move

Clinical Nursing Manual

- 6. Place the tray on bedside locker. Keep hamper/linen basket at the bed side.
- Arranging articles at the bed side saves time and energy.
- 7. Place stool at footend of bed and place fresh linen on it in the reverse order of use.

Keeping articles at convenient place and within reach promotes ease of work and saves time.

- 9. Lower head end of bed. Keep bed in flat position and lower side rails.
- Working with the bed in lowered position promotes good body mechanics.

10. Remove wrist watch and wash hands Keeping the bed in flat position enables the nurse to make a wrinkle free bed.

11. Switch off fan Prevents chance of cross infection.

12. Remove pillow and place it over the seat of the Prevents spread of dust and microorganisms.

chair/stool with open end away from the entrance to room.

Reduces chance of accumulation of dust.

13. Remove any personal items on the bed, inside the pillow Avoids loss of patient's belongings cover, under the pillow, under the mattress etc.

- 14. Stand on the side of the bed.
- 15. Strip linen from all sides starting from head end to foot end. Move around the bed systematically.

Moving around the bed systematically prevents stretching, and possible muscle reaching, strain

16. Bundle the linen each at a time and discard it into the linen hamper if they are not to be reused.



17. If reusing linen

- Remove blanket from foot end, dust, fold and place on the stool
- Remove towels, dust and place neatly on stool
- Take pillow, hold free end downwards, dust and place on the stool. If pillowcase is dirty, remove and discard into the hamper.
- Fold top sheet on the bed itself into 4 folds. Hold both ends of sheet, shake gently into the hamper and place on the stool
- Remove drawsheet, dust it and four-fold and place on stool
- Remove underpad and discard into the bin.
- Fold bottom sheet lengthwise with head end of both sides touching and feet end on both sides touching, into four folds

Prevents sheet from dragging on the floor. Dusting into hamper avoids spread of dust and microorganisms. Vigorous shaking of sheets should never be done.

Folding lengthwise reduce risk of contamination from foot end to head end.

Bed Making

Clinical Nursing Manual

- 18. Clean top of mattress with a dry duster from head end to foot end and collect into kidney tray.
- Damp dusting causes mildew on the mattress.
- 19. Fold mattress from top to bottom and clean under surface of mattress with dry duster.
- 20. Clean head end and half of body of cot with damp duster.
- 21. Now fold mattress from bottom to top, clean the under surface of mattress and body of cot from the middle to foot end as described above
- 22. Replace duster and keep mattress flat
- 23. Place bottom sheet at the center of the bed (FIGURE)
- 24. Open up the bottom sheet, make mitered corners, first at Making the head end and then at the foot end and tuck on that side moving from head to foot. Separate the feet slightly apart and flex the knees instead of bending the back when tucking linen under the bed.

mitered corners tucking prevents slipping of sheet and keeps bed firm.

Maintaining good body mechanics prevents undue strain on nurse's back.

- 25. Spread underpadover it. Tuck them together on the side you are standing. Tuck the middle portion first, then bottom sheet. head end followed by foot end (FIGURE)
- Underpad prevents soiling
- 26. make mitered corners at head and foot ends (if sheet is ensures a wrinkle free bed not enough, make mitered corner at head end only. Leave foot end of sheet even with foot end of bed.) While tucking pull the sheets with both hands.
- Move to other side of bed, tighten bottom sheet and Pulling and tucking the sheet
- 27. Tuck underpad on the side.

- While tucking, keep palms downwards in order to get even appearance.
- 28. Place the top sheet in four fold, with the top end at level with head end of the mattress. Spread the sheet.

Clinical Nursing Manual **Bed Making**

29.	Place blanket over the top sheet, 15 to 20 cm below
	from the top of the mattress. Cuff the top of the sheet
	over the blanket (FIGURE)

Smooth cuff protects patient's skin from irritation caused by the blanket.

30. Make a toe fold about 15 cm from the bottom of Ensures adequate space for the mattress (FIGURE)

toes under the sheet.

- 31. Tuck the top sheet and blanket together at the foot end and make a modified mitered corner, allowing the sides to hang free
- 32. Change pillow case and replace pillow with free end Free end of pillow away from facing away from the entrance of room or door. (FIGURE)

entrance gives neat appearance and prevents collection of dust.

33. Place or tie toels at the head end of bed (bath towel, sponge towel and face towel)

Allows easy access for the patient.

34. Clean inside and outside of locker and arrange patient's Promotes a neat appearance. belongings neatly

- 35. Replace articles
- 36. Wash hands

Reduces risk of transmission of microorganisms.

PREPARING AN OCCUPIED BED

DEFINITION:

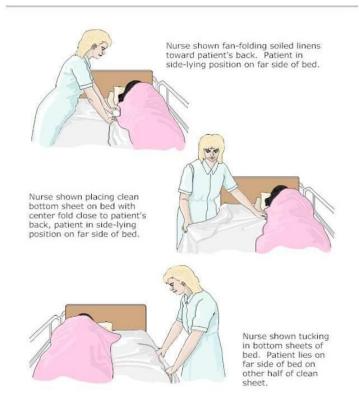
Making a comfortable bed with a patient who is confined to the bed in it.

PURPOSES:

- To provide comfort for patients whose physical condition confines them to bed and for patients on imposed bed rest for therapeutic reasons
- To change et\soiled linen for the bed-ridden patients.
- To maintain neat appearance and clean environment.
- To provide a smooth wrinkle free bed foundation thus minimizing sources of skin irritation.

ARTICLES REQUIRED:

- Dusters -2
- Chair/stool
- Virex disinfectant spray
- Hamper or dirty linen basket
- Bucket
- Clean bed linen
- Clean gloves
- Kidney tray.



PROCEDURE:

S.NO NURSING ACTION

1. Assess patient's general condition and check for any limitation in physical activity.

RATIONALE

Determines level of activity and ensures patient's safety during the procedure.

Clinical Nursing Manual Bed Making

2.	Explain to patient the need for bed making.	Facilitates patient co-
		operation.
3.	Wash hands	Prevents spread of
		microorganisms
4.	Assemble all equipment and arrange on the bed side chair	Organized efforts facilitate
	in the order of use.	ease of performance of task.
5.	Close door/curtain.	Provides privacy.
6.	Adjust the height of the bed. Lower side rails near to you,	Adjusting height of bed
	leaving the opposite side rails up. Release any equipment	reduces strain on the nurse.
	attached to the bed linen with clips like call bell, IV tubes,	Releasing equipment attached
	Foley's catheter, drains etc.	to bed linen prevents
		discomfort and accidental
		dislodgement of the tubes.
7.	Check bed linen for patient's personal items. Remove	Avoid loss of personal items.
	extra pillows.	
8.	Loosen the top bedding from head end to foot end.	Makes removal of blanket
	Remove blanket leaving the top sheet over the patient.	easier.
9.	If blanket and bedspread are to be re-used, fold lengthwise	Facilitates replacement and
	and keep on the chair.	prevents wrinkling.
		Lengthwise folding prevents
		contamination of head end of
		sheet.
10.	Position the patient on side on the far side of the bed	Provides space for placement
	facing away. Adjust the pillow under the head. Be sure	of fresh bed linen. Side rails
	that the farthest side rails are up.	ensure safety.
11.	Loosen bottom linen from head end to foot end on both	
	sides.	
12.	Fan-fold the bottom draw sheet towards the patient and	
	push it as close to the patient as possible. PICTURE	
13.	Roll the Underpad towards the patient.	Provides maximum work
		space for placing clean linen.

Clinical Nursing Manual

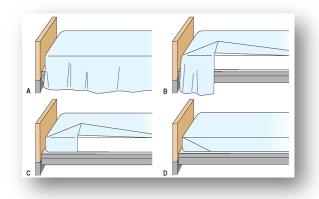
- 14. Fan-fold the bottom sheet towards the patient.
- 15. Dust the mattress with dry duster
- 16. Apply clean bottom linen, which is fan-folded length wise to the exposed half of the bed, keeping the centerfold in center of the bed [PICTURE]
 - a. Fan/fold the bottom sheet towards the patient. Smoothen the bottom layer over the mattress and bring edge over near side. Allow the sheets to hang about 25 cm over the mattress edge, make mitered corner at the sides till the foot end.

When the patient turn to the other side these soiled linen can be easily removed.

Dusting minimizes the number of microorganisms

Applying linen over bed in successive layers minimizes expenditure of time and energy.

Keeping seam edges down eliminates irritation to patient's skin. Mitered corners will secure the sheet on the bed.



Protects bed linen from soiling

- b. Bring the mackintosh back into place and clean it using dry duster (if soiled replace the mackintosh).
 Place the clean draw sheet over the mackintosh and tuck both mackintosh and draw sheet under the mattress
- 17. Raise the side rails on working side and go to the other

Maintains safety.

C10	ρ
olu	\cdot

18. Lower the side rails and assist the patient to roll slowly to the other side of bed over the fold of linen

Exposes opposite side of bed for removal of soiled linen and placement of clean linen.

- 19. Loosen the edges of the soiled linen from underneath the mattress.
- 20. Remove the draw sheet by folding it into a bundle and place in the linen bag. Remove the bottom sheet and put it in linen bag. Clean and roll mackintosh towards the patient.

Makes linen easier to remove.

21. Dust the mattress with dry duster and spread the fanfolded clean linen smoothly over the edge of the mattress from head end to foot end. Dusting minimizes the number of microorganisms

22. Pull taut and secure the bottom sheet under the head of the mattress. Miter corners. Pull the side of the sheet taut and tuck under the side of the mattress.

Removes wrinkles and creases in linen, which are uncomfortable to lie on.

Smooth linen will not irritate

23. Straighten the mackintosh and draw sheet.

Maintain patient's comfort.

24. Assist the patient in rolling back to supine position and reposition the pillow.

Tucking will keep the bed firm.

patient's skin.

25. Tuck the mackintosh and draw sheet in the same manner.

Sheets should be equally distributed over bed by correctly positioning the center-fold.

26. Place top sheet over the patient with center-fold lengthwise down the middle of the bed. Open the sheet from head to foot and unfold it over the patient.

Top sheet prevents exposure of body parts. Having patient hold the sheet encourages participation in care.

27. Ask the patient to hold the top linen and tuck around the shoulders. Remove the used top sheet by pulling from down and place it in the linen bag.

Provides warmth for the

28. Place the blanket over top sheet as in an open bed

	(PICTURE)	patient.
29.	Make a horizontal toe pleat and modified mitered corner	Tucking the linen together
	in the foot end allowing the sides to hang free.	gives neat appearance and toe
		pleat provides adequate room
		for the legs under the sheet.
30.	Place the upper edge of blanket 5-6 inches lower than the	Provides warmth for the
	top sheet as in open. Fold it over the blanket's upper	patient. This type of fold,
	border to form a cuff.	covering the upper edge of
		blanket avoids irritation from
		direct contact of patient's skin
		with blanket.
31.	Change the pillow case and replace pillow/pillows with	Maintains neat appearance.
	open end facing away from door or entrance to room.	
32.	Place the call signal and all other tubing back and place	Ensures safety and comfort
	the patient in comfortable position.	
33.	Discard the dirty linen in the linen bag and wash hands.	Prevents transmission of
		microorganisms
34.	Record the observations made on the patient in the nurses	Provides accurate
	notes	documentation of patient.



• Patients with respiratory and cardiac disorders may be unable to tolerate lying flat during bed making. Top to bottom method of occupied bed making can be used for such patients

PREPARING A POSTOPERATIVE BED MAKING

DEFINITION:

Preparing a hospital bed to receive the patient who has undergone surgical procedure.

PURPOSES:

- To provide a safe, clean and comfortable bed for a postoperative patient.
- To provide appropriate position to the patient who has undergone an operation.
- To protect the patient from being hypothermic.
- To be equipped to meet any possible postoperative emergencies.
- To protect the mattress and bedding from getting soiled from bleeding, vomiting, drainage/discharges.
- For quick transfer of patient from trolley to bed.

ARTICLES REQUIRED:

- 1. All articles needed to make an open bed.
- 2. Additional articles.
 - A small mackintosh and towel
 - A tray containing (postanesthetic tray)
 - Clean rag pieces or gauze pieces.
 - Artery forceps
 - Mouth gag
 - Airway
 - Tongue depressor
- 3. Temperature tray
- 4. IV stand and other requisites for IV administration
- 5. Hot water bag
- 6. Bed blocks-2 (in case of surgery under spinal anaesthesia)
- 7. Suction apparatus
- 8. Articles needed for oxygen administration
- 9. Additional articles as per patient requirement (e.g. Pillows)

- 10. B.P apparatus
- 11. Kidney tray

PROCEDURE:

S.NO NURSING ACTION

- 1. Prepare the foundation of the bed as in open bed
- 2. Place extra mackintosh and towel at the head end
- The foot end of the top linen is left untucked.
 They are folded back evenly with the mattress
- 4. Fanfold the top linen to the opposite side of the entrance standing on side of the bed



Protects the bed from soiling with vomitus

Helps in transferring patient easily from stretcher to bed



- 5. Place hot water bags beneath the fan folded top linen and remove it before receiving the patient
- 6. Place articles such as infusion stand, bed blocks and post-anesthetic tray near the bed ready for use.
- 7. Pillow is not used but can be kept at the head end

Keeps the bed warm.

Protects the patient from injury by hitting against the bars at head end.

Clinical Nursing Manual

Bed Making

8.	Additional mackintosh and draw sheet can be	Protects the bed from getting soiled
	used according to the site of operation.	
9.	Additional pillows if used should be protected	Additional pillows are used to
	with water proof covers	support the operated area.
10.	Rinse and replace the dusters and basin	
11.	Wash hands.	Reduce risk of transmission of
		microorganisms.

PREPARING A CARDIAC BED

DEFINITION:

A cardiac bed is used to help the patient to assume a sitting position, which can afford him greatest amount of comfort wit least strain.

PURPOSES:

- To relieve dyspnea caused by cardiac diseases
- To provide comfort with least strain
- To reduce work load of heart in cardiac diseases.

ARTICLES REQUIRED:

- Bedsheets
- Underpad
- Drawsheet
- Blanket
- Dusters -2
- Basin with disinfectant solution {virex}

, Clinical Nursing Manual

- Laundry bag
- Pillows (additional)
- Back rest
- Cardiac table
- Foot rest.

PROCEDURE:

S.NO	NURSING ACTION	RATINALE
1.	Explain the patient what will be done and how	
	it would help him to be comfortable.	
2.	Collect articles, fold and arrange the linen on	Arranging linen in the order of use
	the stool in the order of use.	aids for smooth functioning
3.	Prepare the bed as an open bed	
4.	Place back rest at patient's back and arrange	Supports the patient's back and
	pillows	provides comfortable position to the
		patient
5.	Assist patient to assume comfortable position in	Provides warmth to the patient
	bed and cover him properly.	
6.	Place a pillow under the knees	Prevents slipping of the patient
7.	Arrange pillows on either side of the patient	Supports the arms
	below both the arms	
8.	Place cardiac table in front of the patient picture	Helps patient to lean forward
9.	Ensure that patient is sitting comfortably in the	
	new position.	
10.	Record the observation made on the patient in	Promotes communication among
	the nurse's notes	staff.