LESSON ASSIGNMENT

LESSON 3 Caring for the Patient's Environment.

TEXT ASSIGNMENT Paragraph 3-1 through 3-5.

LESSON OBJECTIVES When you have completed this lesson, you should be able to:

3-1. Identify reasons for providing care for the patient's environment.

3-2. Identify the types of cleaning and procedure used in cleaning the patient's unit.

3-3. Identify the general principals of bedmaking.

3-4. Identify methods of making the ambulatory patient's bed.

SUGGESTION Work the lesson exercises at the end of this lesson before beginning the next lesson. These exercises will help you accomplish the lesson objectives.
LESSON 3
CARING FOR THE PATIENT'S ENVIRONMENT

3-1. OVERVIEW

To provide safety and comfort of the patient, his unit should be cleaned in such a manner as to provide a safe and attractive environment. In addition, his bed should be made in a manner that provides comfort and appears neat and orderly. The bed is the center of activities for many patients in a hospital. The patient may be fed, bathed, and receive treatment in his bed; therefore, it should be made as clean and as pleasant as possible.

3-2. CLEANING A PATIENT UNIT

a. Scope of Responsibility. Nursing service personnel are responsible for the bed, bedside cabinet, chair, overbed table (when used), lamp, and curtain or cubicle partition. In addition, when custodial housekeeping services are not available, the medical specialist is also responsible for the floor and windowsills within the patient unit area and the adjoining bathroom.

b. Types of Cleaning. The two types of unit cleaning are termed concurrent and terminal.

(1) Concurrent unit cleaning is the cleaning of a unit daily or in accordance with local standing operating procedure (SOP). A similar procedure is required on a regularly scheduled basis for a long-term patient to ensure that any accumulation of dust and germs is eliminated.

(2) Terminal unit cleaning is the cleaning of a unit, when the patient is discharged, transferred, or dies. This type of cleaning includes more activity than the daily (concurrent) cleaning of the area.

c. Equipment. The equipment required to clean a patient unit follows:

(1) Wheeled utility cart.

(2) Wheeled laundry camper.

(3) Cleaning cloths.

(4) Wastebasket with paper bag or plastic liner.

(5) Basin of prescribed detergent-germicide solution.
d. Terminal Cleaning Procedure.

1. Assemble the equipment in the utility room and take it to the patient unit.

2. Clear the bedside cabinet (and overbed table if used). Check for any personal articles left by the patient and turn them in to the wardmaster. Place all utensils and any reusable treatment equipment on the cart. Discard waste in the wastebasket. Place any unused linen in the unit in the laundry hamper.

3. Strip the bed. Remove the pillow, placing the pillow on the chair and the pillowcase in the hamper. Lower the Gatch bed. Loosen the bedding all around, walking around the bed and lifting the mattress edge to release the linen without snagging it on the bedsprings. Check to see that no articles are concealed in the linen folds. Roll each piece toward the foot of the bed. Check the pocket of discarded pajamas and bathrobe. Place all linen in the hamper. Fold woolen blankets, if used, and place them on the cart for special laundry.

4. Clean the bed. Wash the top of the plastic mattress cover and inspect it for any tears. Rinse the cloth frequently and use it damp but not dripping wet. Replace any damaged cover. Turn the clean surfaces of the mattress together, toward the head of the bed. Wash the bottom half of the bedframe and all crevices. Lower the Gatch bed at the knee. By grasping the clean fold of the mattress, lift and swing its clean side crosswise on the clean half of the spring and wash the exposed surface. Place the pillow on the unwashed upper half of the spring. Wash the top surface of the pillow. Place the pillow clean side down on the clean mattress surface and wash the other side. Wash the upper spring, raising the head portion of the bed, to complete bed cleansing (figure 3-1).

![Figure 3-1. Cleaning the bedside unit.](image-url)
(5) Wash the cabinet, inside and out. Complete the unit cleaning by washing the chair, bed lamp (cord unplugged), signal cord, and overbed table.

(6) If you are responsible for the floor, sweep and mop it and wash the windowsills. Wash your hands when the cleaning is completed and remake the bed for a new occupant.

(7) Discard the waste. If cleaning cloths are to be reused, place them in the laundry hamper.

(8) Wash the collected utensils and place them in the utensil boiler (sanitizer) for a 30-minute boiling period. Wash the utility cart and return it to the storage place.

(9) Wash hands.

(10) Remove the clean utensils from the utensil boiler. Dry and return them to the storage shelf.

3-3. GENERAL PRINCIPALS OF BEDMAKING

a. Make all beds in a nursing unit alike for uniformity of appearance. A well-made bed is neat, comfortable, free of wrinkles, and readily adaptable to the specific needs of an individual patient.

b. When making beds, use good body mechanics and make each movement purposeful.

c. Handle all linen inorder to reduce dust and spread of microorganisms. Do not shake or fan out the clean or soiled linen. Hold the soiled linen away from your uniform and place it in the laundry hamper.

d. Provide clean blankets for each new hospital patient. Use cotton blankets for safety and economy of laundering.

e. Following Army Medical Department policy, use plastic protective cover on all mattresses and pillows. (Add a rubber or laminated cotton drawsheet to protect the bottom or foundation sheet as necessary.)

f. When standard cotton bedspreads are not available, use a top sheet as a blanket cover.
3-4. MAKING THE AMBULATORY PATIENT’S BED

a. General. An ambulatory patient is one who is able to walk, and therefore, not confined to bed. Except for the equipment used and minor differences concerning the folding of the top covers and the cleaning required, the ambulatory patient’s bed (also referred to as an occupied open bed) and an unoccupied closed bed (made after terminal cleaning of a bed unit) are generally made in like manner. Generally, in an unoccupied closed bed the top covers are not folded back in order to maintain clean inner surfaces. A check is made of the condition of the plastic mattress cover and plastic pillow cover and they are replaced as necessary. In addition, before this bed is made, the cleaning will have been done and all linen, blanket, and bedspread must be clean. The following equipment and procedures relate to making an unoccupied open bed routinely on a daily basis. Linen is changed as required, in consonance with local nursing unit policy.

b. Equipment. The daily allowance of clean linen including towel and washcloth is obtained as required. Other equipment consists of the following:

(1) Washbasin containing detergent-germicide solution.
(2) Cleaning cloth.
(3) Clothes hamper.
(4) Paper bag.

c. Preliminary Procedures.

(1) Assemble the materials at the bedside, placing the clean linen on the chair in the order of use—pillow, pillowcase, spread, blanket, and sheets on top. Then move the bedside cabinet and chair away from the bed and adjust the bed to a level (horizontal) position. Turn the bed crank handle inward to prevent injury.

(2) Strip the bed and tighten the mattress cover from head to foot. Strip the bed according to the following:

   (a) Remove the soiled pillowcase and place it in the clothes hamper. Place the pillows against the chair back.

   (b) Loosen all linen while moving around the bed, raising the mattress lightly and lifting the linen edges free. Do not tug the linen as this may cause the linen to snag on the springs.

   (c) If any item of linen is to be reused, fold the linen as it is removed from the bed and place it on the clothes hamper.
NOTE: If a linen hamper is not available within or adjacent to the bed unit, hang the used pillowcase on the back of the chair to receive the soiled linen. Do not allow soiled linen to touch the floor.

d. **Steps in Bed Making.** The bed is made in the following manner, completing one side before going to the other.

   1. **Step 1.** Place the bottom sheet on the mattress. Center it lengthwise; fold at midline with the hem seam down and the bottom hem even with the foot edge. Unfold the sheet across the bed. Tuck the surplus under the head of the mattress. Pull the excess sheet taut and smooth over the top edge of the mattress, tightening it from the underside of the mattress (figure 3-2).

   2. **Step 2.** To miter the corner, pick up a hanging side of the sheet edge about 12 inches from the head of the mattress. Lay it back on the mattress in a triangle fold.

   3. **Step 3.** Tuck the hanging corner of the sheet under the mattress, holding your hands palm down to protect your knuckles from the bedspring.

   4. **Step 4.** Place your hand at the side of the mattress and even with the top edge. Bring the triangle fold down over your hand to ensure a firm, smooth mitered corner.

   5. **Step 5.** Tuck the sheet under the mattress working from top to bottom. If mitered properly, the sheet will be smooth and neat when the bed is occupied, and when the Gatch bed is elevated.

   6. **Step 6.** Center the top sheet on the foundation (previously placed sheets) with the hem seam up and even with the head edge of the mattress. Permit the surplus to extend at the foot.

   7. **Step 7.** Center the blanket with the edge approximately 8 inches (about one handspan) from the head edge of the mattress and the surplus at the foot.

   8. **Step 8.** Center the spread or sheet with the edge even with the head of the mattress and the surplus at the foot.

   9. **Step 9.** Place your hand under the foot end of the side of the mattress to hold the foundation sheet taut while raising the mattress slightly. Smooth and tuck the top sheet, blanket, and spread under the foot of the mattress. Miter the corner. Leave the side of the top covers hanging free.
Step 1.
Place bottom sheet on mattress.

Step 2.
Miter the corner.

Step 3.
Tuck the hanging corners.

Step 4.
Place hand at side of mattress.

Step 5.
Tuck sheet under mattress.

Figure 3-2. Making a bed (continued)
Step 6.
Center the top sheet.

Step 7.
Center the mattress

Step 8.
Center the spread.

Step 9.
Tuck the top sheet.

Step 10
Complete making of bed.

Figure 3-2. Making a bed (concluded)
(10) **Step 10.** Go to the opposite side of the bed and complete the making of the bed as follows:

(a) In sequence, fold back the spread, blanket, top sheet, and, if used, the drawsheet and protective sheet to the center of the bed.

(b) Smooth and straighten the foundation sheet, maturing the top corner and pulling the sheet taut while tucking the side under the mattress from head to foot. If used, pull the protective and drawsheets taut and tuck them under the mattress.

(c) Bring over the top covers in succession. Tuck them under at the foot and miter the corner.

(d) Fold the top edge of the spread under the blanket edge; then bring the top sheet over to form a cuff and fanfold the bedding half-way to the foot of the bed.

**NOTE:** Do not form a cuff when preparing a closed bed.

(11) **Step 11.** Replace the pillowcase and pillow (figure 3-3).

(a) Gather the open-end portion of the pillowcase to about midway of the pillowcase length.

(b) Fit the pillow in the case with one hand while continuing to hold the gathered edges with the other.

(c) Move one hand to the closed end grasping the pillowcase and the pillow within. With the other hand, extend the pillowcase so that it covers the pillow.

(d) Fit the pillow into the corner on one side of the pillowcase and pleat the excess under at the opposite side.

(e) Place the pillow neatly at the head of the bed with the open end of the case away from the door.

Figure 3-3. Putting on pillowcases.
**e. Concurrent Cleaning.**

(1) Damp-dust bedside cabinet, bedframe, and chair.

(2) Realign the bed, bedside cabinet, and chair. Turn inward the bed wheels and crank handles. Lock the wheels.

(3) Hang a clean paper bag by securing the tab edge between the surfaces of the bedside cabinet top. (Tear down the sides of the bag to form 2-inch tabs. Fold three sides outward to form a cuff; the fourth side is the hanger. Folding in this manner provides clean surfaces for handling.) A paper bag is used for disposal of tissue wipes and other personal debris. It is not used for soiled dressings.

(4) Leave the unit clean, orderly, and ready for occupancy. Check to see that the lamp and signal cord (if used) is in the proper location.

(5) Discard the waste. Wash and sanitize the washbasin and wash your hands.

**3-5. MAKING THE PATIENT OCCUPIED BED**

**a. General.** Changing bed linen and making a comfortable, neat bed while it is occupied by a patient usually follows the completion of a cleansing bath. During this time, excellent opportunities are provided to establish good relations with the patient through patient-centered conversation and for instructing the patient how to move, turn, conserve energy, and maintain good body alignment. If the patient is helpless or unconscious, two individuals should work together. The operator gives instruction and performs the procedure while the assistant holds the patient and helps to turn him. When an assistant is unavailable to assist a helpless patient, the side rails of the bed opposite the operator should be raised to prevent the patient from falling out of bed.

**b. Precautions in Making a Patient Occupied Bed.** Some precautions in making a patient occupied bed are to prevent exposing the patient, provide for his safety, and (by the proper handling of linen) prevent the possible spread of microorganisms.

**c. Equipment.** The following equipment should be obtained as required.

(1) Washbasin containing an appropriate solution.

(2) Cleaning cloth.

(3) Two sheets.

(4) One pillowcase.