

- D. Unoccupied bed – a bed made without the resident in the bed.
- E. Surgical bed – made so the resident/patient can be moved from a stretcher to the bed without having to struggle with linens.
 - 1. The bed is left at stretcher height
 - 2. The sheets are folded away from the side where the patient will enter.
 - 3. Sometimes the pillow is placed on the nightstand by the bed until the patient is safely in the bed.
 - 4. This procedure differs from one facility to another.
- V. Rules for handling linens
 - A. Follow the rules of medical asepsis
 - 1. Wear gloves when handling soiled linen
 - 2. Wash hands before handling clean linen
 - 3. Because the uniform is considered to be dirty, the clean linens should never touch the uniform, but held away from the body.
 - 4. Never shake linens since this causes the spread of microorganisms.
 - 5. Clean linens are placed on clean surfaces.
 - 6. Dirty linens are never placed on the floor. Place soiled linen in the proper receptacle.
 - B. Clean linens are collected in the order that they will be used
 - 1. mattress pad
 - 2. bottom sheet
 - 3. drawsheet
 - 4. bed protector
 - 5. top sheet
 - 6. blanket
 - 7. bedspread
 - 8. pillowcase(s)
 - C. Place linens on the bed with the hem edges away from the patient.
 - C. Any linen brought into a resident/patient's room must stay there because it is considered to be contaminated.
 - D. Other linens can be collected when collecting the bed linens, i.e. towels, washcloths, gowns, bath blanket.
 - E. When removing dirty linens roll them away from you. The side of the linen that touched the resident is rolled inside.
 - F. Linen should always be stored in an enclosed linen cart. It should never be left uncovered on a cart in the hallway.
 - G. Never apply the pillowcase by securing the pillow under the chin and sliding the pillow into the case.
- VI. General rules for making the bed
 - A. Use good body mechanics
 - B. Follow rules of medical asepsis – standard precautions
 - C. Linens must be tight and wrinkle free
 - D. Make as much of one side of the bed as possible before going to the other side. This saves time and energy.
 - E. A common element in all bedmaking is leaving the unit neat and tidy.

ACTIVITIES

- I. Practice Making the **Occupied Bed** and **Unoccupied Bed** utilizing Skill Checklists. (The students may form groups of four and practice the skills of making occupied and unoccupied beds. Prior to testing with the instructor, the students will perform Check 1 peer evaluation.)
- II. Test with the instructor making the Occupied and Unoccupied Bed.

(Instructor's Note: While waiting to test with the instructor, the students will participate in four activities. As the students are testing making occupied and unoccupied beds after they have had their practice time, they will participate in four activities. All students will do all four activities. The activities are: 1. Terms and Abbreviations Related to Making Beds; 2. Within the activity group research the development, treatment and prevention of decubitus ulcer formation on the internet and write a Care Plan for Decubitus Ulcer Prevention; 3. Write a 2-3 page journal entry after the students have spent one hour either laying in a bed or sitting in a wheelchair and **not moving at all**. 4. Within the activity group make a poster of the stages of decubitus ulcers. Each activity will take approximately one day.)

MATERIALS NEEDED

Hospital Beds
Fitted bottom sheets (optional)
Flat sheets
Drawsheets
Blankets
Bedspreads
Pillowcases
Gloves
Linen Cart
Soiled linen receptacle
Skill Checklists: Making the Bed, Making the Occupied Bed
Sorrentino, Sheila A. *Mosby's Textbook for Nursing Assistants, 5th edition*. St. Louis, Mosby Year Book, 1999.
Texas Department of Human Services Nurse Aide Curriculum
Student Journals
Internet access
Wheelchairs

ASSESSMENT

Successful completion of Check 2 for Making the Bed and Making the Occupied Bed. If students do not have Check 1 completed, this will result in an automatic 0 for their grade.

(Instructor's Note: When testing the students, it is possible to test six students at one time. Use three beds; one student is the bed-maker, one is the resident/patient. Making beds is one skill where adequate testing can be done while observing more than one student at a time.)

Completion of all four assignments related to bedmaking and decubitus ulcer formation. (Instructor's Suggestion: Give a completion grade for these. Tell the students, if they have a borderline grade at six-weeks grading, completion of these assignments will automatically raise their borderline grade.)

ACCOMMODATIONS

For reinforcement, the students outline and practice making the occupied and unoccupied bed.

For enrichment the students will write a 2-3 page journal entry after reading the material from www.decubitus.org/ on incidence, cost, and Medicare's impressions of decubitus ulcer formation and treatment.

REFLECTIONS

CARE PLAN FOR DECUBITUS ULCER PREVENTION

Using the internet, investigate the following sources, read each, and develop a care plan for the prevention of decubitus ulcers.

www.expertpages.com/news/decubitus_ulcer.htm **Excellent written description of cause, treatment, and prevention of decubitus ulcers.**

www.home.flash.net/~bdpersh/ldhp/DU_bedbound.htm **Good source for pictures of locations of decubitus ulcers on the body.**

www.merck.com/pubs/mmanual/section10/sec10.htm **Good written description of causes, treatment, and prevention of ulcers.**

WORK AS A GROUP AND DEVELOP ONE CARE PLAN.

WHEN DEVELOPING THE CARE PLAN: Identify the 1. Body Part (i.e. head) and give the 2. Possible Location of Ulcers on that body part.

NEXT, identify the 3. Specific Interventions that can be made to prevent the formation of ulcers in that area.

DEVELOPMENT OF POSTER ON DECUBITUS ULCERS

Using the same internet sources as the Care Plan Activity, read each of the sources thoroughly.

After reading the information, all members of your group are to design and make a poster showing the six stages of Decubitus Ulcer formation.

You can draw, make a 3-D depiction, use paper, whatever you wish to do creatively. You cannot take pictures from the internet or books and put on the poster.

IMMOBILITY EXERCISE

Each member of the group is to place himself/herself in a bed or wheelchair. Then they are to mark the time on a clock or watch, and nobody is to move for one hour. They cannot shift position, roll over, cross their legs – no movement, whatsoever.

When the hour is completed, each person is to write their reactions to the hour of immobility in their journal. They are to include their initial reaction – prior to starting the exercise (e.g. did they think this would be very easy?) and then elaborate on their feelings during the hour. Did their feelings change; if so, how did they change? Did they ever reach a point where they felt they could not possibly continue?

Did they feel pressure in any area of their body? Did any part of their body “go to sleep?”

Finally, each person is to use their imagination and double the time. What if that hour had been two hours? Patients are to be turned every 2 hours. Discuss how patients might feel at the end of two hours.

MEDICAL TERMINOLOGY RELATED TO BED MAKING

Using *Taber's Medical Dictionary*, define the following terms and abbreviations and place each on a flash card. Drill the cards, then do the worksheet TERM DEFINITION.

Qid	Cutane/o
tid	Derm/o
bid	Dermat/o
BR	Sub-
CBR	Intra-
HOB	-itis
OOB	-osis
CHUX	Epi-
ac	-ology
pc	-ologist
— p	continence
— s	incontinence
— c	void
— q	micturate
— q	defecate
BM	feces
	intact
Skin Integrity	Organ/o
Perfusion	Micro-
	Hypo-
	Decubitus

TERM DEFINITION

A. NAME: _____

For each of the following, use the knowledge of prefixes, suffixes, and root words/combining forms, and write a definition. Make sure that this is your definition and not one taken out of a book. Make it short and on that YOU UNDERSTAND.

Dermatology

Dermatitis

Dermatosis

Subcutaneous

B. Epidermis

Microorganism

Dermatologist

Hypodermic

Intradermal

Above each of the underlined words, write the meaning of the word or definition.

Hypodermic injections are given **subcutaneously**. If they are given incorrectly, they can

cause a **dermatitis or dermatosis**. The frequency of administering hypodermics varies.

Sometimes they are given **qd** or **bid**. Sometimes they are given more frequently. If

someone is to be tested for tuberculosis, they are given an **intradermal** injection.

Some antibiotics are given **qd, bid, tid, or qid**. Because each medication is unique,

Some are to be taken **c** meals, and some **s**. Some are to be taken **ac**, and some

pc.

Mr. Jones had surgery today. He is to remain on **CBR** until 8 p.m. After that, he is on **BR c BRP**. Tomorrow he is to be **OOB**. Should Mr. Jones be **incontinent**, He is to have his bed changed immediately. This is to maintain **skin integrity**, and keep his skin **intact**, preventing the formation of **decubitus ulcers**.

NURSE AIDE SKILLS EXAM

MAKING THE BED/Procedural Guideline #17** (Adapted from the Texas Department of Human Resources Nurse Aide Curriculum)

****NOTE:** If students do not complete Check 1, peer evaluation, they will receive a 0 for the Check 2 Skill Test. The initials of the peer performing the check must appear above the Check 1 column.

POSSIBLE POINTS		CHECK 1	CHECK 2
4	1. Properly cleans hands before procedure as appropriate. <ul style="list-style-type: none"> a. wetting b. soaping c. time d. drying and turning off faucet 	_____	_____
4	2. Assembles appropriate equipment (linen) and places in order to be used. Handles linen correctly. (Away from uniform and placing on a clean surface.)	_____	_____
2	3. Begins with bed in flat position and elevated to appropriate height if possible.	_____	_____
3	4. REMOVES SOILED LINEN AND PLACES IT IN APPROPRIATE PLACE. <ul style="list-style-type: none"> a. Wears gloves b. Rolls linen away c. Places in receptacle or chair or other surface than the floor. 	_____	_____
3	5. Avoids shaking and touching linens to uniform as much as possible.	_____	_____
5	6. Applies bottom sheet to clean mattress (making only half of the bed) <ul style="list-style-type: none"> a. keeps straight and centered b. hems are placed away from patient c. Tucks top (or top fitted) d. Miters corner at top (or bottom fitted) e. Drawsheet in correct position and tucked 	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
4	7. APPLIES TOP LINEN (again making only half of the bed) <ul style="list-style-type: none"> a. Top sheet b. Bedsread c. Tucks bottom d. Miters corner on bottom 	_____ _____ _____ _____	_____ _____ _____ _____

7	8. MAKES REMAINDER OF BED. MAKES ALL CLEAN BOTTOM LINEN TIGHT AND FREE OF WRINKLES (UNLESS WATER BED, EGG CRATE OR AIR MATTRESS.)		
	a. applies remainder of bottom sheet at top of bed	_____	_____
	b. applies remainder of bottom sheet (miters corners or places fitted	_____	_____
	c. tight bottom sheet and draw sheet (worth 2 points)	_____	_____
	d. tucks top sheet and bedspread (worth 2 points)	_____	_____
	e. miters corner of top covers	_____	_____
2	9. Applies clean pillowcase with zippers and or tags to inside of pillowcase. Places on bed, away from the doorway.	_____	_____
5	10. Leaves bed completely and neatly made according to facility policy. Lowers bed to the lowest level. Places call light on bed. Leaves patient unit area neat and clean, With wheels of bed locked.	_____	_____

TOTAL POSSIBLE POINTS: 39

TOTAL POINTS EARNED: _____

NURSE AIDE SKILLS EXAM

MAKING THE OCCUPIED BED/Procedural Guideline #18**

Adapted from the Texas Department of Human Services Nurse Aide Curriculum.

***NOTE: If students do not complete Check 1, Peer Evaluation, they will receive a 0 for the Check 2 Skill Exam. The initials of the peer performing the check must appear above the Check 1 column.*

Note to Nurse Examiner: Select only residents who need side rail or simulate situation for demonstration of this skill.

POSSIBLE POINTS		CHECK 1	CHECK 2
4	1. Properly cleans hands before procedure as appropriate. <ul style="list-style-type: none"> a. wetting b. soaping c. time d. drying and turning off faucet 	_____	_____
3	2. Identifies residents, explains procedure to resident and encourages resident to participate as appropriate.	_____	_____
4	3. Assembles appropriate equipment (linen) before procedure in the order to be used, handles linen correctly, and places it in appropriate place.	_____	_____
4	4. Provides for resident's privacy as appropriate. <ul style="list-style-type: none"> a. closes curtains b. removes bedspread and blanket c. covers with sheet/bath blanket d. removes soiled top sheet. 	_____	_____
6	5. INSURES RESIDENT'S SAFETY. <ul style="list-style-type: none"> a. side rails up, never turning back on resident. b. wheels locked c. moves resident so when turning does not fall into the side rail d. wears gloves at appropriate times 	_____	_____
2	6. Begins with bed in flat position, if tolerated by resident, and elevated appropriate height if possible.	_____	_____
2	7. RAISES SIDE RAIL AND ASSISTS RESIDENT TO ROLL ON SIDE FACING SIDE RAIL.	_____	_____
2	8. Rolls or fanfolds soiled linen, soiled side inside, to the center of the bed.	_____	_____

2	9. Places clean bottom sheet along the center of the bed and rolls or fanfolds linen against resident's back and unfolds remaining half.	_____	_____
2	10. RAISES THE OPPOSITE SIDE RAIL AND ASSISTS THE RESIDENT TO ROLL OVER THE BOTTOM LINEN, PREVENTING TRAUMA AND AVOIDABLE PAIN TO RESIDENT.	_____	_____
2	11. REMOVES SOILED LINEN AND PLACES IN APPROPRIATE PLACE.	_____	_____
2	12. Avoids shaking and touching linen to uniform as much as possible.	_____	_____
4	13. MAKES ALL CLEAN BOTTOM LINEN TIGHT AND FREE OF WRINKLES (UNLESS WATER BED, EGG CRATE, OR AIR MATTRESS).	_____	_____
6	14. APPLIES UNSOILED TOP LINEN	_____	_____
	a. places top sheet and removes bath blanket or other sheet.		
	b. places blanket and bedspread		
	c. Tucks half of bottom, mitering corner (2 points)		
	d. Tucks remaining half of bottom, mitering corner (2 points)		
2	15. Applies clean pillow case with zippers and/or tags to inside, gently lifting resident's head to replace pillow, placing opening toward door.	_____	_____

TOTAL POSSIBLE POINTS: 51

TOTAL POINTS EARNED: _____