

## Section A

# Basic Nursing Skill Procedures

### *Basic Nursing Skill Procedures Covered:*

1. Complete Bed Bath
2. Bed Making
3. Cardinal Signs
4. Catheter Care
5. Enema
6. Hair-wash
7. Comfort Device and Mechanical Device
8. Eye Care
9. Mouth Care
10. Nebulization
11. Oxygen Therapy

## 1. COMPLETE BED BATH

### Definition

A bed bath is a cleansing sponge bath given to a patient who is unable to take care of self and is completely restricted to bed. He/She is dependent on care givers for maintenance of basic hygienic needs.

### Indication

- The patient who does not have physical and mental capability of self-bathing.
- The patient who needs bath in bed or those who are in plaster cast and traction, on strict bed rest, paralyzed, unconscious.
- The patient who has undergone surgery.

### Purposes

- To clean the body of dirt and bacteria.
- To enhance elimination through skin.
- To stimulate circulation.
- To induce sleep and relieve fatigue.
- To prevent bedsore.
- To regulate body temperature.
- To provide active and passive exercise.
- To establish effective nurse patient relationship.
- To observe any typical symptoms.

### Special Points to Remember

- Maintain privacy of the patient by screen.
- Explain the procedure to the patient.
- Wash hands before and after procedure.
- All equipment should be conveniently placed before procedure at patient bedside.
- Only a small area of body should be exposed and bathed at a time.
- Observe skin especially prominent area.
- Special attention is given to axillae and groin.
- Cleaning is done from the cleanest area to the less clean area.
- Avoid bathing patient immediately after a meal as it depletes the blood supply to the digestive organs and interfere with the digestion.
- Do not touch the body with wet hand. It is unpleasant to the patient.
- The temperature of water should be adjusted for the comfort of the patient and the water should be changed at intervals to maintain a comfortable temperature.
- The temperature for the sponge bath should be 110°F – 115°F.
- Powders are used to prevent friction.
- Cream or oil is used to prevent drying.
- The nurse should maintain posture and balance of the body during bed bath.
- Check the physician's order to see any specific precaution.
- Assess the patient's need for bathing.
- Assess the patient's ability for self-care.
- Check vitals.
- Assess the patient's mental state to follow direction.
- Check the equipment available in the patient's unit.
- Check whether the patient has taken the meal in the previous one hour.

**Articles Required: (Refer the Annexure for Preparation)*****Trolley 1: Upper Shelf*****Tray 1: Hair wash articles**

- Kidney tray medium – 1
- Paper bag – 1
- Bowl with cotton balls and gauze pieces
- Towel – 1
- Trough – 1 (mackintosh, towel and bandage)
- Shampoo – 1
- Oil – 1
- Comb – 1

**Tray 2: Eye care articles**

- Bowl with cotton balls
- Normal saline
- Gloves

***Lower shelf***

- Bucket – 2
- Mug – 1

***Trolley 2: Upper Shelf*****Tray 3: Mouth care articles**

- Bowl with gauze pieces
- Mouth wash
- Artery forceps – 1
- Thumb forceps – 1
- Kidney tray – small
- Gloves (if continued after eye care not required)

**Tray 4: Perineal Care articles (Sterile tray)**

- Bowl with gauze pieces (12)
- Artery forceps – 1
- Thumb forceps – 1
- Kidney tray – small
- Sterile gloves – 1 pair

***On trolley***

- Antiseptic solution
- Normal saline
- Betadine

**Tray 5: Nail and feet care articles**

- Kidney tray – 1
- Paper bag – 1

- Nail cutter – 1
- Nail brush – 1
- Nail filer – 1
- Towel – 1
- Basin with luke warm water – 1
- Emollient

### ***Lower Shelf***

#### **Tray 6: Bed making articles**

Refer bed making for occupied bed

#### **Tray 7: Bed bath and Back care articles**

- Bath towel – 2
- Mackintosh – 1
- Soap – 1
- Mittens – 4
- Face towel – 1
- Oil/body lotion
- Powder – 1
- Kidney tray – 1
- Patient's clothing – 1 pair
- Basin – 1
- Jugs – 2 (hot and cold water)
- Laundry bag

### **Preparation of Patient and Unit**

- Explain the sequence of the procedure to the patient and explain how the patient can assist you.
- Place the articles needed conveniently on the bedside table.
- Bring the patient to the edge of the bed and toward the nurse to prevent overreaching.
- Close the window and doors if necessary and put off the fan to prevent draughts.
- Offer bedpan or urinal if necessary (wash hands).
- Keep the patient flat if the condition permits. Remove extra pillow and backrest.
- Remove the personal clothing and cover the patient with the bath blanket/top sheet during bath.

### **Procedure**

Nursing Action	Rationale
• Offer bed pan/urinal.	<ul style="list-style-type: none"> <li>• Avoids interruption during complete bed bath.</li> <li>• Feels comfortable.</li> </ul>
• Bring both trolleys to patient bed side. Keep trolley 2 near the foot end and trolley 1 near to working area.	<ul style="list-style-type: none"> <li>• Easy access and saves time, avoids confusion.</li> </ul>
• Instruct the patient for complete procedure.	<ul style="list-style-type: none"> <li>• Aids cooperation throughout procedure and since the care is complete it will take time.</li> <li>• Mentally preparing the patient.</li> </ul>
• Wash hands	<ul style="list-style-type: none"> <li>• To prevent cross infection.</li> </ul>

Contd...

Nursing Action	Rationale
<ul style="list-style-type: none"> <li>Lower the side rails and follow the steps of hair wash procedure. (to be done if hair wash not done since three to four days)</li> </ul>	
<ul style="list-style-type: none"> <li>Assist the patient in positioning.</li> </ul>	<ul style="list-style-type: none"> <li>Makes patient comfortable</li> </ul>
<ul style="list-style-type: none"> <li>Replace the articles of bed bath (if time permits).</li> </ul>	<ul style="list-style-type: none"> <li>Gives time for patient to rest in between procedure.</li> </ul>
<ul style="list-style-type: none"> <li>Wash hands/if time does not permit then change gloves</li> </ul>	<ul style="list-style-type: none"> <li>Prevents spread of infection in between the procedure.</li> </ul>
<ul style="list-style-type: none"> <li>Next procedure to be done is mouth care.</li> <li>Refer: mouth care procedure.</li> </ul>	
<ul style="list-style-type: none"> <li>Position the patient toward right side/dominant side.</li> </ul>	<ul style="list-style-type: none"> <li>Maintains body mechanics.</li> </ul>
<ul style="list-style-type: none"> <li>Remove the patient's clothing and cover with top sheet.</li> </ul>	<ul style="list-style-type: none"> <li>Prevents exposure of patient unnecessarily.</li> </ul>
<ul style="list-style-type: none"> <li>Check the temperature of the water. Mix hot and cold water in the basin fill the basin half and check on the back of the hand.</li> </ul>	<ul style="list-style-type: none"> <li>To prevent burns.</li> </ul>
<ul style="list-style-type: none"> <li>Wash, rinse, and dry the area in the following sequence – face, neck, forearm, near arm, chest, abdomen, back, foreleg, near leg, and pubic region.</li> </ul>	<ul style="list-style-type: none"> <li>Avoids unnecessary exposure and maintains temperature of the patient throughout the procedure.</li> </ul>
<b>Cleaning of face:</b> <ul style="list-style-type: none"> <li>Place bath towel over patient's chest, under the chin.</li> <li>Eye care to be done (refer eye care procedure).</li> <li>Wet the mitten, squeeze water and clean patient's face.</li> <li>Ask for preference of the patient for soap on face or not.</li> </ul>	<ul style="list-style-type: none"> <li>Prevents bed/pillow wetting.</li> </ul>
<ul style="list-style-type: none"> <li>Clean forehead, cheeks, nose, neck and then ears.</li> <li>If soap to be applied, apply soap on second mitten and wipe with wet mitten (first mitten used).</li> </ul>	<ul style="list-style-type: none"> <li>Soap dries the skin of face.</li> </ul>
<b>Cleaning of arms and hands:</b> <ul style="list-style-type: none"> <li>Remove top sheet, from the arm that is farthest from your side.</li> <li>Place one towel beneath the arm lengthwise.</li> <li>Raise side rail and move to the farthest site.</li> <li>Lower side rail of farthest site and clean the arms with soap and water in long and firm strokes (distal to proximal).</li> <li>Clean from digits to axilla and dry the hand.</li> <li>Raise the arm and support above forehead and clean/wash axilla.</li> <li>Apply talcum powder.</li> <li>Place a towel half under patient's hand and put basin on towel.</li> <li>Immerse/Dip patient's hand in water and soak for 2–5 minutes.</li> <li>Wash hand and finger nails with nail brush, cut long nails by placing finger over kidney tray.</li> <li>Dry hand thoroughly.</li> <li>Repeat same steps on the other arm also.</li> </ul>	<ul style="list-style-type: none"> <li>Avoids unnecessary exposure.</li> <li>Prevents bed from wetting.</li> <li>Prevents fall.</li> <li>Enhances circulation.</li> <li>To remove odor.</li> <li>Soaking softens the skin and cuticles around nail and loosens debris if present under nail.</li> <li>Removes moisture.</li> </ul>
Change water if necessary.	<ul style="list-style-type: none"> <li>Luke warm water maintains comfort of patient.</li> </ul>
<b>Chest and abdomen:</b> <ul style="list-style-type: none"> <li>Place one corner of the bath towel over one shoulder and the opposite corner is folded back and placed on the other shoulder, both corner are fixed under the back of the patient.</li> <li>Fold both blankets down to the level of the umbilicus.</li> <li>With the left-hand raise the towel and the right hand mittet, clean the chest with firm strokes.</li> </ul>	<ul style="list-style-type: none"> <li>Towel maintains privacy and warmth.</li> <li>Minimum exposure of the patient.</li> <li>Enhances circulation.</li> </ul>

Contd...

Nursing Action	Rationale
<ul style="list-style-type: none"> <li>Replace the towel over the chest between wash, rinse and dry periods. Remember to wash under the breast (female).</li> <li>While the towel remaining on the chest, fold back both blankets down to the pubic region.</li> <li>Clean the abdomen with more consideration to umbilical region and skin fold areas.</li> <li>Clean one side of abdomen and then the other side and keep abdomen covered.</li> <li>Remove the towel and put back both blankets and cover the patient completely.</li> </ul>	<ul style="list-style-type: none"> <li>Prevents chilling in between procedure.</li> <li>Dirt usually collects in the skin folds.</li> <li>To prevent chilling.</li> </ul>
Change the water, waste water is discarded in to the bucket.	
<b>Back:</b> <ul style="list-style-type: none"> <li>Turn the patient to prone or side lying position with face away from the nurse.</li> <li>Make sure that patient will not fall to the ground, raise the side rail on the opposite side.</li> <li>Fold back the bath blanket from the shoulder to the thighs and tuck the edges securely around the thighs.</li> <li>Place the towel over the bed, close to the back, lengthwise.</li> <li>Wash, rinse and dry the back from the shoulders to the buttocks with brisk circular movements.</li> <li>Dry the back thoroughly and apply powder/lotion.</li> <li>Pay particular attention to the pressure points.</li> <li>Assist the patient back to supine position.</li> </ul>	<ul style="list-style-type: none"> <li>For proper access to the back by exposing and through assessment of back.</li> <li>For exposure.</li> <li>To prevent bed wetting.</li> <li>Moisture causes irritation and also can cause pressure ulcers.</li> <li>Circular motion enhances circulation.</li> <li>To check for redness.</li> </ul>
Apply the upper garments and cover him with bath blankets.	Maintains warmth and comfort.
Cover the patient with top sheet till abdomen.	
Change water if necessary.	
<b>Lower extremities:</b> <ul style="list-style-type: none"> <li>Expose the farthest leg by folding the bath blanket toward the midline.</li> <li>Perineum to be covered/draped properly.</li> <li>Bend the knee and place your non-dominant hand under the leg and flex.</li> <li>Ask the patient to hold on until you are cleaning the leg.</li> <li>Clean with soap and water from ankle to knee and knee to thigh (ankle to knee can be cleaned by keeping leg straight also unless contraindicated) and dry thoroughly.</li> <li>Place the mackintosh underneath foot and keep basin on it.</li> <li>Flex the knee so that the sole of the feet sides in basin.</li> <li>Clean the foot by first soaking it for 2–5 minutes while paying particular attention to the toes and nails.</li> <li>Clean the nails with nail brush and cut long nails with nail cutter.</li> <li>Remove the basin and dry the foot thoroughly.</li> <li>Repeat the procedure on the near leg.</li> </ul>	<ul style="list-style-type: none"> <li>Unnecessary exposure to be avoided.</li> <li>Avoids straining of muscles of leg.</li> <li>Avoids spillage.</li> <li>Enhances circulation and also opens pores of skin.</li> <li>Prevents bed wetting.</li> <li>Softens nail cuticles and removes dirt.</li> <li>Maintains hygiene.</li> <li>Moisture in between fingers causes growth of microorganisms.</li> </ul>
Discard the water and change gloves/wash hands thoroughly.	
Give perineal care to the patient (refer perineal care).	To maintain perineal hygiene.
Change gloves and don disposable gloves.	Prevents cross infection.
Change the patient to clean pajama/gown.	

Contd...