WHY GIVE BED BATHS?
■ Attending to a patient’s hygiene needs is a vital part of the nurse’s role. Some patients may need assistance with personal hygiene, especially if they are bed-bound.
■ Bed baths can benefit patients psychologically as they maintain self-esteem and a positive body image.
■ Doing this helps to build the nurse/patient relationship, as often it is during this time that patients discuss issues that trouble them.
■ A bed bath is an opportunity to check the patient’s skin.
■ A patients’ personal hygiene should be addressed at least once every 24 hours.

BEFORE A BED BATH
■ Explain what you are about to do, even if the patient is unconscious.
■ Clear the area of any obstacles so that you can move around freely.
■ Ensure the ward is warm.
■ Have all the equipment to hand so that you do not have to leave the patient during the procedure.
■ The use of toiletries such as deodorants, cosmetics and perfume should be determined by the patient.

EQUIPMENT
■ Clean nightwear/gown.
■ Clean bed linen.
■ Bowl of hand-hot water.
■ Soap and face cloth.
■ Comb.
■ Disposable wipes.
■ Two towels.
■ Blanket to cover patient.
■ Glide sheet.
■ Equipment for oral hygiene.
■ Equipment for urinary catheter hygiene (if applicable).

PROCEDURE
■ Two nurses should carry out a bed bath if the patient is unable to assist.
■ If the patient is able to help in any way it should be encouraged.
■ Draw the screens around the bed. If the patient is in a cubicle, close the door and draw the curtains.
■ To maintain the patient’s privacy and dignity, as well as to keep the patient warm, place a blanket over the patient before all nightwear is removed. Remove anti-embolic stockings if necessary.
■ The water should be hand hot. If the water cools down then it should be replenished. If the patient is conscious, ask him or her to confirm the temperature of the water.
■ Start with the patient’s face, but first check if the patient uses soap.
■ Next wash the limbs, starting with the arm furthest away from you. Place a towel under the arm to avoid wetting the sheets. After the arm is washed the second nurse can dry it as you are washing the other arm. Repeat this procedure for the legs.
■ Roll the patient and insert a glide sheet.
■ While the patient is on his or her side, wash his or her back. At this point you can check for pressure areas. Return the patient onto his or her back and wash the other side.
■ Wash and dry the genital area using disposable wipes. If a patient has a urinary catheter, catheter hygiene should be carried out.
■ Change the bed linen and reposition the patient comfortably.
■ Dress the patient, taking care of any drains or intravenous lines. It may be appropriate to dress the patient in a gown.
■ Carry out or assist the patient with their oral hygiene needs.
■ Comb the patient’s hair.
■ The patient can have his or her hair washed while in bed. If a patient is confined to bed for a long period, a hairdresser may be needed to cut and style the hair.

FURTHER READING

The information given serves as a general reference. Nurses should consult their individual trust policies on clinical procedures.