

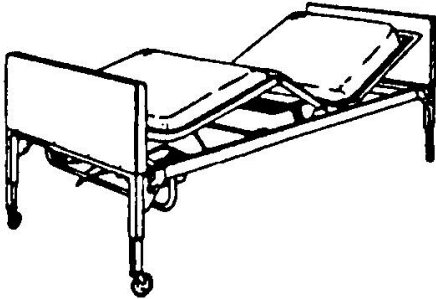
# Island Home Medical

508-693-4380

## Hospital Bed Instructions

### General

Hospital beds permit body positioning that is not feasible in a regular home bed. They also permit the attachment of other pieces of equipment that cannot be used on a regular home bed.



Always raise the foot section of the bed slightly before raising the head to help prevent the patient from sliding to the bottom of the bed.

When transferring to or from a commode or chair always adjust the height of the bed slightly **higher** than the object to be transferred to for transfers **out** of bed, and slightly **lower** for transfers **into** the bed.

ALWAYS make sure the castor locks on the bed are set to the "On" position to lock in place. The bed may still slip on the floor, so an attendant should be available for assistance if the patient is unstable on their feet.

### **Operating Instructions:**

#### For semi electric bed:

The pendant has six buttons. The left buttons control the head; the right buttons control the foot end. The middle buttons control the head and foot sections simultaneously.

The upper button elevates, and the lower button lowers.

Turning the crank at the footboard clockwise raises the whole bed and turning the crank counter clockwise lowers the whole bed.

An emergency battery power supply is kept under the bed. Insert a fresh 9 volt battery into the appropriate cable at the bottom of the black bed motor to allow adjustment of all bed functions in the event of power failure.

#### For full electric bed:

The pendant has three rows of buttons.

The top button controls the position of the head of the bed.

The middle button controls the foot end of the bed

The bottom button controls the bed frame height.

The left side of each button elevates, and the right side of each button lowers.

An emergency battery power supply is kept under the bed. Insert a fresh 9 volt battery into the appropriate cable at the bottom of the black bed motor to allow adjustment of all bed functions in the event of power failure.

#### Side rail operation:

To drop the rail to the down position, pull out both knobs and allow rail to slide down.

To raise the rail up, pull out both knobs, lift the rail up, and release the knobs at the desired height, or remove completely. Pull knobs out to re-insert rail.

**Do not attempt to move the bed with casters locked.**

**Cleaning:** Clean the bed, pendant and frame with any household cleaner.

Patients and caregivers should be familiar with all aspects of the bed and should be alert to any unusual noises or difficulties in operating bed that may indicate a mechanical problem. Anything unusual should be reported to Respiratory Home Services immediately.

## The Benefits and Risks of Bed Rails

Potential benefits of bed rails include:

- aiding in turning and repositioning within the bed.
- providing a hand-hold for getting into or out of bed.
- providing a feeling of comfort and security.
- reducing the risk of patients falling out of bed when being transported.
- providing easy access to bed controls and personal care items.

## Patient Safety

Patients who have problems with memory, sleeping, incontinence, pain, uncontrolled body movement, or who get out of bed and walk unsafely without assistance, must be carefully assessed for the best ways to keep them from harm, such as falling. Assessment by the patient's health care team will help to determine how best to keep the patient safe. Although not indicated for this use, bed rails are sometimes used as restraints.

Potential risks of bed rails may include:

- Strangling, suffocating, bodily injury or death when patients or part of their body are caught between rails or between the bed rails and mattress.
- More serious injuries from falls when patients climb over rails.
- Skin bruising, cuts, and scrapes.
- Inducing agitated behavior when bed rails are used as a restraint.
- Feeling isolated or unnecessarily restricted.
- Preventing patients, who are able to get out of bed, from performing routine activities such as going to the bathroom or retrieving something from a closet.

## Meeting Patients' Needs for Safety

Most patients can be in bed safely without bed rails. Consider the following:

- Use beds that can be raised and lowered close to the floor to accommodate both patient and health care worker needs.
- Keep the bed in the lowest position with wheels locked.
- When the patient is at risk of falling out of bed, place mats next to the bed, as long as this does not create a greater risk of accident.
- Use transfer or mobility aids.
- Monitor patients frequently.
- Anticipate the reasons patients get out of bed such as hunger, thirst, going to the bathroom, restlessness and pain; meet these needs by offering food and fluids, scheduling ample toileting, and providing calming interventions and pain relief.

When bed rails are used, perform an on-going assessment of the patient's physical and mental status; closely monitor high-risk patients. Consider the following:

- Lower one or more sections of the bed rail, such as the foot rail.
- Use a proper size mattress or mattress with raised foam edges to prevent patients from being trapped between the mattress and rail.
- Reduce the gaps between the mattress and side rails.