

the foot of the bed is a great help to press against when pulling up. Or in some cases a thick soft cord can be fastened by a "half-hitch" to the foot-rail of the bed; this is useful when the patient is being raised for feeding, arrangement of pillows, sounding, etc.

Now let us consider upon what is best to be done where we have a very weak and helpless patient, and only a very little untrained help at hand for the nurse. She must be able to utilise this help to the best advantage, showing what to do, and how to avoid strain in doing it. Anyone, not at all strong, could take a firm hold of a patient under the thighs, while the nurse takes the upper part of the body, the heaviest part, so giving a good lift up in the bed. Before beginning to lift, the patient's shoulders should be raised up high enough for the pillows to be arranged by one, the other holding him. When all is ready, he is lifted up to the pillows in the way already described. A water-pillow helps to a certain extent to keep a patient from slipping down in the bed, but by its buoyancy makes more difficult the necessary raising up to give the slipper or bed-pan. In this case, if the nurse is alone and the patient very helpless, the best way is to help him to turn on one side, then place the bed-pan in its proper position with one hand, while the other supports the patient; gently bring him back, keeping the hand in support, when a very slight amount of raising will bring him comfortably on the pan, without the strain and discomfort of trying to lift him up high enough to get the bed-pan underneath him in the ordinary way. Even in cases where there are two nurses, one has to be on duty many hours alone, and often at night a nurse feels unwilling to call up anyone to help her.

If a patient needs attention in changing a draw-sheet, can a nurse do it alone without causing unnecessary pain or discomfort to the sick person or over-straining her own strength?

First of all everything must be got ready—clean sheet, powder and spirit for the back, soap and warm water. Put all close to the bedside, so that it can be easily reached with one hand; a candle with a glass shade is useful—it can be safely set near a bed. Turn the patient gently on his side—if you can do this with the draw-sheet, it is easier, but do not be too quick or he will be nervous of falling—keeping his head comfortably on a pillow, roll up the soiled sheet, and put in the clean one in the usual way, but keep one hand on his back, helping him to keep over, wash and dry the back, use spirit and powder, doing all needed as quickly as possible, bring him over on to his back, then turn him to your side, assuring him

that he is all right and safe, and he can hold on to you. Your two hands will then be free to put the sheets right behind his back.

When the patient is safely in his usual position again, the sheet can be pulled straight and smooth, tucked firmly in both sides of the bed, and everything put neat and comfortable in the usual way. See illustration, "nurse changing draw-sheet alone."

If a patient is able to be lifted from his bed to a chair, first raise him to a sitting position, draw the pillows down to support the back, half lift both legs out of bed, then lift him to the seat prepared close to the bedside. He can be lifted back on the bed in the same manner, of course the legs being put in last in this case.

In changing the shirt of a helpless patient, lifting and raising much is avoided by making the shirt to open down the back. An ordinary one can be cut in a straight line up the back as far as the middle seam of the yoke only. The edges are best just wrapped over and fastened with one or two safety-pins, no tapes or buttons. If the patient is likely to recover soon, and can raise himself up a little, the shirts can then be turned half-way up instead, and smoothly folded, thus being easily changed without much fatigue.

In doing the daily washing not much lifting will be needed; a blanket should be placed under the patient, half of it serving to cover him while he is being washed, and while he is turned on his side, for his back to receive attention.

The method of keeping a patient comfortably sitting up in bed, may perhaps come within the scope of this paper. Bed-rests sound very well in theory, but in practice fall far short of the ideal aimed at. They are often found most unsuitable for patients very weak and ill.

Their use greatly accentuates the tendency to slip down in bed, thus making the patient look and feel most uncomfortable. Some well-placed pillows (not too many) will be found satisfactory, and easy to arrange.

These notes may be useful to nurses working in private practice, or engaged in daily visiting, and may aid them in a most important and often perplexing part of their daily work.

Miss Isabel McIsaac, formerly Superintendent of the Illinois Training School for Nurses at Chicago, is writing a text-book for first year pupils, which is to deal entirely with methods and technique, and which will be the first of the series of American Text-Books of Nursing to be published by the American Journal of Nursing Company.

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