

 <p><b>Connecticut Valley Hospital Nursing Policy and Procedure</b></p>	<p><b>SECTION D: PSYCHOLOGICAL ADAPTATION CHAPTER 13: BASIC NEEDS</b></p> <p><b>POLICY AND PROCEDURE 13.3.3a Century Tub</b></p>
<p>Authorization: Nursing Executive Committee</p>	<p>Date Effective: May 1, 2018 Scope: Registered Nurses and Licensed Practical Nurses</p>

**Standard of Practice:**

The registered nurse will provide the patient the opportunity to bathe for hygienic and therapeutic purposes.

**Standard of Care:**

The patient will be afforded hygienic and/or therapeutic baths in the Century Tub as clinically indicated for the purposes of cleansing, improving circulation, increasing joint mobility, relieving discomfort, and removing necrotic tissue.

**Policy:**

A written physician's order is required for use of the Century Tub for specific treatment purposes. It is not required for bathing purposes. The treatment order must state rationale/purpose for use of the Tub and specify time limitations.

Patients will never be left unattended in the Century Tub. Staff must keep "hands on" during transfer in and out of the Tub, especially while the chair is raised with the patient in it.

In the event of an emergency (i.e., injury, collapse, etc.), staff will support the patient's head above water, turn whirlpool off, drain the Tub, and call for immediate assistance.

Staff will document all prescribed treatments.

**Procedure:**

A. **Ambulatory patient:**

1. Greet patient and explain entire procedure.
2. Close privacy curtains around Tub to secure patient's dignity and privacy.
3. Close Tub drain. Draw bath water observing temperature readings on Tub. (Water should be 100 - 104 degrees F.) If alarm sounds and light indicator flashes, water is too hot. Re-

adjust mixer valve control handle until alarm sound stops, observing temperature reading. Full Tub to halfway between whirlpool outlet and overflow port.

4. Have patient disrobe or assist patient when necessary, putting soiled clothing in appropriate places.
5. Have patient sit in Tub chair, which has been secured and which is in the lowest position and arms facing away from Tub, securing seat belt around the patient's lap, as instructed for either small or large size patients. For high back chair, use secure chest belt also.
6. Drape sheet, bath blanket or towel over patient for warmth and privacy while putting patient in and out of Tub.
7. Raise chair by up foot pedal until chair bottom clears Tub rim height by 2". Keep touch and eye contact with patient for reassurance. Carefully turn chair around and over middle of Tub. Lower chair by down foot pedal into middle of Tub until Chair stops. Observe that patient's feet are clear of chair and gently guide patient's legs into the well.
8. Shampoo patient's hair if required by using the shower hose. (Offer patient wash cloth to cover eyes). Wet the hair, push the shampoo button and use plastic cup to measure. Apply shampoo to patient's hair, massage scalp and rinse thoroughly with shower hose attached to side of Tub.
9. Wash upper torso (all parts of patient above water only) by using dispensing system. Push shampoo button and hold wash cloth under rubber spigot to catch soap (shampoo is also upper body wash). Wash patient's entire upper torso or if able, have patient wash self. Rinse with shower hose attached to side of Tub.
10. Activate whirlpool by pressing the on button making sure the aerator control knobs are set for desired cleaning and therapeutic action. Push body oil button to dispense cleansing oil into water.
11. Watch timer indicator which automatically starts when whirlpool is activated. Patient should remain in whirlpool for not longer than seven minutes.
12. After activating whirlpool, turn chair to the right, lifting patient's right leg and holding it to the right side of the Tub for one minute, thus exposing the perineal cavity areas and allowing whirlpool action to cleanse perineal area. After one minute, return chair straight to middle of the Tub for remaining six minutes.
13. When timer shows "07" minutes, raise the patient above the water, draping again with a sheet, bath blanket or towel, for privacy and warmth. Towel dry patient over the Tub. Do not turn off the whirlpool until patient is out of the water. Carefully turn chair away from Tub gently lifting patient's legs over side and out of Tub. Keep touch and eye contact with patient for reassurance. Lower chair by down foot pedal until chair is all the way down and patient is able to get out of chair. Release seat belt and open Tub drain.
14. The patient should not remain in the water any longer than 20 minutes, including whirlpool. Anything longer will require a Physician's Written Order stating time limit and reason.

**15. Check body thoroughly and report any unusual findings such as bruises, injuries, rashes, etc., to the RN or charge person.**

16. Have patient complete personal ADL's or assist if necessary.

**B. Non-ambulatory patient:**

1. Greet patient and explain entire procedure.
2. Attach Century Tub Chair to Saf-Kary as trained.
3. Back Saf-Kary up to the patient's bed, align for a normal bed to wheelchair transfer. Position the foot rest in the up position. Lock brakes by stepping down on the locking arm tab located on the side of the castors.
4. Transfer the patient into the Saf-Kary Seat, using the proper nursing techniques.
5. Secure the seat belt around the patient's lap as instructed for smaller or larger patients.
6. Unlock castor brakes, lower foot rest and position patient's feet on them.
7. Transfer patient to bathing area using all safety precautions taught and reassuring patient at all times.
8. Attach Saf-Kary to Saf-Lift as trained, making sure Saf-Lift is in lowest position and arms of lift are facing out away from the front of the Tub.
9. Remove Saf-Kary from Lift as trained in Century Tub Inservice.

**PATIENT IS NOW READY FOR BATH FOLLOWING PROCEDURES A#2 - #16.**

10. When bath is completed and body checked, ADL's completed, reattach Century Tub Saf-Kary to Century Tub chair, making sure lift is in low position and arms of lift are facing out away from front of Tub.

**Operation of 10-S Scale**

Beginning of each shift (or if readings are off) - attach empty chair to lift and raise off of "Saf-Kary" frame. If comfort pads are normally used during bathing, put them on the chair. Press the "zeroing" button and step away from the chair. Within 2 seconds, the unit will beep and 0.0 will appear on the L.C. The 10-S is now accurate and the "zeroing" button should not be touched again until next shift.

**Unit will shut itself off**

**Weighing Procedure:**

1. Lift resident clear of chair frame (strapped into chair and sitting on comfort pads if used).

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| <ol style="list-style-type: none"><li>2. Press LB button and step away from chair.</li><li>3. Read and record weight.</li><li>4. Proceed with bath - unit shuts off automatically.</li></ol> |
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11. Place patient's feet on foot rest and make sure seat belt is properly set.
12. Transfer patient back to bedside, using safety precautions and reassuring patient at all times, and transfer patient into bed using the proper nursing technique for wheelchair to bed transfer.

**C. Cleaning Procedure**

The Century Tub shall be cleaned immediately before and after each use.

1. Empty Tub and rinse dirt down drain with hot water (105-109 degrees F).
2. Close drain and fill with hot water until water level almost covers whirlpool intake. Leave about ½ inch of intake above water.
3. Turn whirlpool motor on by touching green on button.
4. Turn disinfectant, (Manufacturer's Recommendation Cen Kleen IV), knob 1/4 turn for approximately 5 seconds or until mixture starts to sputter out of jets. Allow to run for about 1 minute, then turn motor off by touching red button.
5. Scrub inside of Tub using Tub brush dipped in mixture. Wipe the chair down using wash cloth dipped in mixture.
6. Open drain and rinse Tub with cold water. Rinse cloth and wipe seat.
7. Spray hose into both jets to rinse whirlpool motor. Do so until water coming out of the intake is clear.

**NOTE: Do this procedure twice if resident was incontinent or has decubitus and/or open lesions.**