

Journal Reflection on Promoting Sleep in the ICU

Nursing is crucial not only in the medical aspect but also in the provision of overall care to patients. Care ranges from the protection of patients and the community to the promotion of health in individuals, the prevention of illnesses, the offering of treatment, and advocacy for sustainable health across populations. Nursing extends beyond providing medical care to patients in hospitals to ensuring a comfortable environment that promotes healing. In this regard, this paper seeks to reflect on the nursing practice of promoting sleep in the ICU.

Working in the ICU requires dedicated healthcare professionals who monitor and provide treatment to patients around the clock. Several factors influence sleep in the ICU, such as noise, lighting, the patient's health condition, and other reasons. To ensure adequate care in the ICU, an environment conducive to sleep should be maintained at all times. As a result, quality sleep, which is critical in the healing process of a patient, is provided. Although hospitals are significantly quieter at night, nurses still ought to ensure proper sleep for patients as and when required. The night shift is particularly significant since the body naturally needs rest. Noise, the effects of medicine administered to patients, and light have to be adjusted to promote sleep.

The ICU unit of the hospital is on the top floor, thus minimizing noise from other groups in the hospital. Also, the hospital has restricted entry to the floor, which ensures minimal interaction on the floor in the form of casual exchanges from nurses and other people. Interactions with the patient are limited to nurses who offer care and authorized visitors. The nurse also ensured that the unit had minimal light. Minimal light promotes calmness, which encourages sleep. Rubert,

Long, and Hutchinson (2007) confirm that sleep deprivation is a common stressor during critical illness in 61% of patients. Thus, it is crucial that sleep is promoted and improved in the ICU.

I was surprised that the same practice applied even to patients on sedatives or other sleep-inducing drugs. As a result, uniformity and general procedure are followed, thus ensuring continued sleep in case the patient unexpectedly wakes up. Also, natural sleep aids such as melatonin are administered to patients. Besides regulating an individual's sleep pattern, melatonin also helps manage blood pressure and immunity.

Decision-making in the ICU highly depends on nurses, since they are primarily charged with monitoring the sleep patterns of patients. However, consultation is allowed with doctors to ensure optimum healthcare provision (Nova, 2019). Nurses have to keep checking on patients to ensure that they are rested and that they are not disturbed. Despite this appearing tiresome, it ensures that quality service is delivered. Leadership and communication are imperative in ensuring that patients are well taken care of. Since different nurses attend to patients, disclosure is necessary for ensuring that each nurse is aware of the procedures that have been done or not done on the patient.

Nursing practices in the ICU have extensively advanced to ensure quality delivery of services to patients. From experience at the hospital, I have been able to learn that much is done to ensure a conducive environment for patients. For example, the use of reduced light and natural sleep aids has enlightened me. Further research has been conducted to reveal other techniques for promoting sleep. However, they have not been utilized. For example, Wong (2015) asserts that

background music aids in calmness and inducing sleep. Music should be considered as a tool for aiding sleep in patients, since there is evidence that supports its application.

In conclusion, promoting sleep in the ICU has been a core practice by nurse practitioners that has been embraced in the hospital. In addition to aiding healing, it ensures that quality life and sustainable care are given to patients. These practices should be adopted in hospitals with ICU units to encourage the holistic provision of care.

References

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