Table 1: Icons and Tips of Sleep Promotion for Patient and Clinician included in the SLEEPKit

Sleep Disruptors	Tips to help improve patient sleep during hospitalization		
	For Patient	For Clinician	
Emotional or physical impa	irment due to illness or hospitalization [4 items]		
1. Worried about medical condition or procedures	 Talk with your care team about your concerns Talk with your family, friends, or other supporters about your concerns Try saying: "I'm worried about the risks of my (e.g. surgery)." "Can you explain the (e.g. procedure) to me?" 	 Ask if the patient has any concerns or questions about the care or treatment Teach the patient about the illness and treatment options Offer support through therapeutic listening Refer patient to social work or spiritual care services Offer information about relaxation techniques (e.g., meditation, Reiki, music therapy) 	
2. Uninformed about nighttime care plan	Talk with your nurse about how you will be cared for during the night (e.g., timing of meds, hygiene, and checkups) Try saying: -"I would like to know when you will (e.g. come to check on me) tonight."	 Plan nighttime care with the patient before bedtime Write nighttime care plan on the patient board Determine if any care at night can be done before the patient goes to sleep 	
3. Changes to the normal bedtime routine	 Talk about your bedtime routine with your nurse. Learn how you can keep it up in the hospital Ask about sleeping aids Try saying: -"What helps me at home when I sleep is (e.g., soothing music)." -"Before I go to bed, I like to (e.g., read a book)." 	 Record the patient's normal bedtime routine at home Talk with the patient about ways to keep up their bedtime routine Talk about sleep routine during nursing handoff Request sleeping aids for patients if needed 	
4. Reduced daily activity	 Talk with your nurse about how to increase your activity Avoid long daytime naps Try saying: -"How can I stay active while in the hospital?" 	 Make an exercise plan for the day with the patient (e.g., short walks, stretching, ROM exercises, maximize time out of bed) and write it on the patient board Speak to Physical Therapy Give pain medication before light exercise or walks Talk to patient about side effects of medication that may make activity difficult 	

Sleep disturbance due to discomfort or care plan schedule [4 items]			
5. Pain	 Talk with your nurse about what improves or worsens your pain Talk with your nurse about timing for pain medication and frequency of pain checks Talk with your nurse about the alternative approaches to pain management (e.g., meditation, Reiki, music therapy) Tell your nurse what helps you feel more comfortable Try saying: -"When I have pain, it helps if I (e.g., listen to relaxing music)" - "Can you help me get into a more confortable position?" 	 Review and discuss pain management with the patient and their care team, and evaluate the need of increasing pain medication at night Check the patient's pain level before they go to bed and intervene as needed (e.g., repositioning and medication) Educate the patient about their pain medication and when they will be given more Suggest alternative approaches to pain management (e.g., meditation, Reiki, music therapy) 	
6. Awakened to take medications	 Talk to your nurse about how it is difficult to sleep after you are woken up to take medication Ask if it is possible to change the time when you receive your medication Try saying: -"It would help if I could receive my medications before I fall asleep. Can we schedule them earlier?" 	 Try not to schedule medication during sleep hours or try to group nighttime interruptions together Schedule medications that affect sleep (e.g. steroids, diuretics) to earlier in the day 	
7. Awakened for vital signs & assessment	 Tell your nurse about your concerns about being woken up for your care Ask for a nighttime care schedule and plan your sleep around it Try saying: "Will I need to be woken up tonight for nighttime care? Can you share the schedule with me?" 	 Work with the patient to create a nighttime care plan Group care together (e.g. medications, treatments, assessments) whenever possible Talk with certified nursing assistant (CNA) about nighttime plan of care Ask physician team if it is possible to change the nighttime routine 	
8. Awakened for personal hygiene	Talk with your nurse about your best times for bathing, changing the linens, and using the bathroom Try saying: -"Can I use the bathroom before I go to sleep?"	 Ask patient about preferred times for personal hygiene Remind CNA to avoid waking the patient for non-urgent hygiene care Group hygiene care with other care activities whenever possible 	
Sleep interruption due to hospital environment or medical care [6 items]			

	For Patient	For Clinician
9. Alarm noise	Press the call light to alert the staff when an alarm is not answered	 Attend to alarm(s) as soon as possible Use teamwork to reduce alarm noises Check alarm setting based on patient's individual condition
10. Staff talking	 Use ear plugs, "white noise", or soft music to block out noise Request a sign to be hung up for quiet voices Try saying: "Can we close the door to reduce the noise?" 	 Keep volume of staff conversations low and away from patient rooms Offer ear plugs, headphones, or a music channel if available Put phones on vibrate
11. Excessive lighting	 Wear an eye mask or a washcloth over your eyes Turn off TV, iPad, and phone prior to sleep Request lights be dimmed at night Try saying: "Can we close the blinds tonight?" 	 Offer to close the curtains Offer eye masks and wash cloth Dim light or use a night light in the patient's room
12. Bedding discomfort	 Ask your nurse if family or friends can bring in your favorite pillow or blanket Talk with your nurse about ways to keep yourself comfortable in bed Try saying: "My family will be visiting today; is it okay if they bring my (e.g., favorite pillow) to help me sleep?" 	 Assess the patient's comfort and condition before bedtime Assist patient in finding a more comfortable position for sleep
13. IV discomfort	 Rest your arm with the IV on a pillow Ask for the IV to be placed in a site that is more comfortable for you Try saying: -"I use my left arm less; can we try putting the IV in the left arm instead?" 	 Position the patient to avoid IV tugging or irritation Assess IV site regularly & take out/change IV as needed Apply warm or cool compresses over IV site Try not to give irritating IV meds (e.g. potassium chloride) during sleep

14. Catheters or drains concerns



- Ask your nurse how you can avoid catheter/drain discomfort
- Ask your nurse about taking out the catheter/drain Try saying:
 - -"Can you empty my catheter/drain before I go to bed?"
 - "Can my catheter come out today?"

- Evaluate the need for a catheter or drain
- Position catheter/drain with an anchor to ensure drainage and comfort
- Assess need for medication to reduce irritation
- Rule out infections as the cause for catheter/drain discomfort
- Record input and output for all drainage devices before sleep