12   Bowel Retraining

Patient name: _____   **Admission:** _____

DATE | NRS INITIAL

I.   The client/caregiver can list goals of bowel retraining.

A. Regularity of bowel function
B. Prevention of fecal incontinence and impaction
C. Prevention of skin breakdown
D. Improvement of client's self-esteem

II.   The client/caregiver can list preparatory measures to promote bowel retraining.

A. Assess and record client's usual pattern of elimination.
 1. Record times of elimination.
 2. Record usual stimulus for elimination.
B. Establish a specific time for elimination, usually after a meal consistent with client's history.
C. Eat diet high in fiber to prevent constipation, but avoid foods that may cause diarrhea.
D. Drink 3000 to 4000 ml of fluid per day unless contraindicated.
E. Exercise regularly.
F. Attain as normal a position as possible for defecation, such as sitting on a bedside commode or toilet and leaning forward.

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III.   The client/caregiver can describe the procedure for bowel retraining.

A. Drink 4 ounces of prune juice each evening.
B. Drink warm fluids just before evacuation to promote peristalsis.
C. Insert rectal glycerin suppository (Dulcolax if glycerin is not effective) 30 minutes before scheduled time for defecation.
D. Have client sit on toilet with feet placed on a stool, if possible, for defecation.
E. Instruct client to bear down and contract abdominal muscles.
F. Massaging abdomen from right to left may be helpful.
G. Rectal stimulation may also be required to promote defecation.
H. Allow adequate time for defecation.
I. Record daily the stool amount, consistency, and so forth.

REFERENCES

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Timby, B. K. (2005). *Fundamental nursing skills and concepts.* Philadelphia: J. B. Lippincott Williams & Wilkins.