

~~ This lab contain these subject by order :

- 1) enema .
- 2) urinal / bedpan (2) assistive , 3) non assistive) .
- 4) urine / 5) stool specimens .

1) Enema

~~ Enema : give the pt any type of solution as a doctor order by the anus .

~~ Purposes :

1. Retraining for bowel movement .
2. Prevent constipation and fecal incontinence during the surgical .
3. Promote a defecation .
4. Wash the bowel from any diagnostic procedure such as colonoscopy .



~~ Assessments :

- 1) Assess the abdomen from tenderness (pain + touch) , masses , distention and bowel movement .
- 2) Assess the physical activity .
- 3) Assess the level of cognitive ability .
- 4) Assess the history of any contraindication such as cardiac disease , Diarrhea .
- 5) Assess the doctor order (type of solution , amount , frequency)
- 6) Assess the medication for any side effect .
- 7) Assess the nutrition habit .
- 8) Assess the frequency of defecation .

~~ equipment :

Enema bag , enema tube , bath blanket , clean gloves , gauze , lubricant ,cup of water , soap .

~~ implementation :

- 1) don't forget the 5 steps .
- 2) prepare the enema bag and the enema tube , the enema bag must be 30-45 cm above the hip of the pt .
- 3) put the bed in the waist level .the side rail that is away from you up , and the near from you down .
- 4) put the pt in the lateral position , right leg is reflexes . if the pt has a stool incontinence put him in the recumbent position (raises the leg) .don't forget to expose the necessary part of the pt body , you can use bath blanket or the top sheet ..
- 5) check the amount of enema bag solution (750-1000 ml) .
- 6) critical : check the temperature of the solution by inner wrist .
- 7) open the clamp of the enema tube to pass the air then close it .
بالعرض مسكر بالطول مفتوح .
- 8) use the lubricant to facilitate insertion of the tube (from 6-8 cm)
- 9) assess the anus from any injury or hemorrhoid .
- 10) insert the tube at the position of the umbilicus without any effort , if you feel any resistant , remove it and retry again .
- 11) if there is any complain , do any of these steps :
 - a) down the enema bag
 - b) close the clamp .
- 12) remove the tube without effort using gauze and discard it in the medical waste .
- 13) clean the anus from front to back (from less contaminated to more contaminated) by water and soap .. then wash your hand .

14) reassure the pt about his health status , turned him to the comfortable position and raise the side rails , return all your equipment .

15) documentation and report any abnormal result .

2) Assistive bed pan

~~ Purposes :

- 1) To collect a specimen .
- 2) promote defecation for pt with physical activity problem .
- 3) retraining for bowel movement .

~~ Assessment :

The same as enema assessment but don't forget that it doesn't need doctor order .

~~ Equipments :

Soap , gauze , cup of water , metal or plastic bed pan , water proof sheet .

- if you have metal bed pan : immerse it in warm water and powder it before using .. put the water proof sheet into it to facilitate cleaning after finishing the procedure .

- - if you have plastic bed pan : powder it before using .. put the water proof sheet into it to facilitate cleaning after finishing the procedure .

~~ implementation :

- 1) don't forget the five step .
- 2) put the pt in the waist level , the side rail away from you up and the near from you down .
- 3) put the pt in the supine position and raise the head of the bed from 30-60 degree .

- 4) put the first hand under the sacrum and the second hand catch the bed pan , then reflex the legs of the pt .
- 5) give the pt nursing call and raise the side rails and put the pt in the lowest level .
- 6) dispose your gloves then leave the pt alone .
- 7) wait the pt until he finished defecation and remove the bed pan in the same way , don't forget to wear a new gloves , then put the bed pan in the Toilet .
- 8) give the pt cup of water and soap with gauze to cleaning from front to back .
- 9) return all your equipment and wash your hand .
- 10) return the pt to the comfortable position , and raise the side rails .
- 11) documentation and report any abnormal result .

3) non assistive bed pan

~~ the same as of purpose , assessment , equipments .

~~ implementation :

- 1) don't forget the five step .
- 2) put the pt in the waist level , the side rail away from you up and the near from you down .
- 3) put the pt in the supine position then move him lateral .
- 4) make the bed pan stick to the mattress of the bed , that causing a pressure that save the position of the bed pan , then return the pt to the supine position .
- 5) raise the head of bed 30-60 degree and flex the pt legs .
- 6) do the same steps of the assistive bed pan (step 5 to 11) but in this case you have to clean the pt yourself (from front to back) .

4) Stool specimens

Equipment:

- clean gloves - bed pan -container with cap and label.
- Tongue blade. -paper towel.

Purposes:

- 1) To detect the presence of bacteria & viruses .
- 2) To determine the presence of occult (hidden) blood .
- 3) To detect the presence of ova & parasites .

Assessment:

The same as bed pan assessment .

Implementation :



يمكن الحصول على العينة من خلال المريض نفسه أو من خلال ال bed pan

- identifier the client by name & file number .
- do the five step .
- nurse should give the client these structures:
 - defecate in a clean bed pan .
 - don't contaminate the specimen with urine .
 - don't place toilet tissue in the bed pan after defecation .
 - notify the nurse as soon as possible after defecation .
 - ask the client to never touch inside the container(critical)
- wear clean gloves to prevent hand contamination & take care not to contaminate the outside of specimen container.
- use one or two tongue blade to transfer the specimen to the container and ensure the specimen label (critical)

- document all relevant information & include the date & time of collection & all nursing assessment (color , odor & amount of feces)
- removing the gloves & perform hand hygiene . send the specimen to the lab .
- if the specimen is watery : put 15-30 ml of it in the container
- if the specimen is hard : put 2 - 2.5 spoon of it in the container . stool لا تنسَ تقييم لون ورائحة وشكل ال

5) urine specimen

~~ Purposes :

- 1) to detect any microorganism in the urine .
- 2) histology for the microorganism and the sensitivity for any treatment .
- 3) to detect any urinary tract infection .



~~ Assessment :

- 1) frequency of urinal and emergency .
- 2) doctor order .
- 3) fluid intake 4) medication 5) flank pain

~~ implementation :

في البداية نقيم الحالة الصحية للمريض إذا كان يستطيع أن يقوم بالعملية بدون مساعدة أم لا .. إن لم يستطيع يقوم الممرض بمساعدته على القيام بذلك ... ممكن الحصول على العينة من المريض نفسه أو من خلال أنبوب القسطرة البولية أو من خلال ال urinal

- 1) five steps .
- 2) instruct the pt how to clean the genitals area (critical)
 - male : center to outer .
 - female : separate the labia and cleaning side to side then the centre .

3) instruct the pt who to take the specimen (critical) :

-اسم الطريقة : clean catch mid stream يعني نأخذ البول من الوسط حسب المراحل التالية

A) initiate the urine .

B) interruption for it .

C) filling into the container .(30-60 ml)

4) ask the client to never touch inside the container(critical) .

5) don't place toilet tissue after urination .

6) don't forget to label the container (critical)

7) hand washing ... reassure the pt ... return your equipment ..
documentation and report any abnormal result .

8) send the specimen to the lab .

لا تنسَ تقييم لون ورائحة وشكل ال urine

