

Leamington Mennonite Home  
Long Term Care

POLICY AND PROCEDURE

<b>CATEGORY:</b> Nursing	<b>SUBJECT:</b> Fleet Enema	<b>SECTION:</b> F <b>POLICY:</b> 2
<b>DATE:</b> February 1995	<b>Administrator:</b> _____ <i>J. M.</i>	
<b>REVISION DATES:</b> December 2004	<b>Director of Care:</b> _____ <i>Cheryl Allick</i>	

**FLEET ENEMA**

**POLICY:**

To remove feces and flatus from the rectum and lower bowel.

**EQUIPMENT:**

- Fleet enema warmed by tap water.
- Bedpan and cover, or commode.
- Toilet tissue, lubricant, water basin.
- Plastic and protective sheeting (blue pads).

**PROCEDURE:**

1. Explain the procedure to the resident.
2. Provide privacy for the resident.
3. Remove pillows and lower head,
4. Assist the resident onto his/her left side and flex knees.
5. Place the protective rubber or plastic sheeting under the resident's hips and a bath sheet over the resident.
6. Prepare the solution and bring to bedside. Caution: the temperature should be 105 – 107 degrees Fahrenheit – if too hot, it may injure the tissues.
7. Lubricate the end of the rectal tube.
8. Expose anal region and insert the rectal tube slowly and gently insert the tip into the rectum.
9. If the resident complains of discomfort, discontinue and encourage the resident to relax (take a deep breath). If discomfort persists, discontinue the enema. Encourage resident to retain fluid as long as possible.

10. Assist the resident to the bathroom or place on the bed pan or commode.
11. If the resident is weak or very ill, do not leave alone.
12. Remove bedpan and save the specimen if required. Place in specimen container with the resident's name and room number.
13. Offer resident soap, water and clean towel to wash his/her hands.
14. Assist the resident to a comfortable position. Cleanse the equipment and return to its proper place.
15. Record all pertinent facts in the multidisciplinary notes and the TARS:
  - a. Fleet enema
  - b. Return stool – constipated, soft, etc.
  - c. Flatus
  - d. Any abnormality
  - e. If retained or expelled
  - f. Effect on patient
16. Cautionary Measures:
  - a. Avoid unnecessary exposure
  - b. Solution not to exceed 105-107°F.
  - c. Do not use force to cause the fluid to enter the rectum.
  - d. Advise the resident to take deep breaths to promote relaxation and the solution be more easily retained.
  - e. Avoid air entering the rectum.
  - f. Instruct the resident not to flush the toilet but rather to pull call bell cord as soon as he is finished.
  - g. Complete lab form requisition if necessary.
  - h. If the enema is not expelled in a reasonable time, 20 – 30 minutes, report to the Registered Staff.
  - i. If the enema is unsuccessful, report to the Physician. Further measures will probable be prescribed.