

Elimination

Assisting with Elimination

Elimination is the process of ridding the body of waste products. **Urine** is the liquid waste, and **stool** (feces) is the solid waste. Many things affect a person's ability to have normal bowel and bladder functions. Changes in diet or fluid intake can upset a resident's normal elimination pattern. Age-related changes can also affect elimination. As we age, food passes through our digestive tract more slowly, and digestion slows. This results in a slowed bowel pattern and decreased absorption of nutrients.

The inability to eliminate without assistance and *incontinence* — the inability to voluntarily control elimination — are upsetting for residents. This affects their quality of life. You need to understand how to support residents with their elimination needs while maintaining their dignity.

Determining Elimination Patterns

Each resident has their own pattern of elimination. This pattern involves their frequency of elimination and usual amounts of urine and stool. Some residents urinate more often than others. Some residents have bowel movements daily, while others have them every other or every third day. You learn a resident's normal pattern so that you can base your care on their needs. This enables you to recognize when a problem occurs or illness changes their pattern. A change in elimination can result from changes in food or fluid intake or from a serious condition.

In addition to your own observations, you can gather information from the resident, family members, and the resident's chart. This information is part of the resident's bowel and bladder assessment. The nurse typically gathers this information, but you may be asked to assist. Be sure you understand what information the nurse needs.

Residents use many different words to refer to urine and stool elimination. Get to know what words they are most comfortable with as you care for them. You may ask the resident or family what words they prefer to use. Although residents may use many different words, you must always be professional when you communicate with the resident and family members.

When you gather information about elimination, remember that talking about this subject is often uncomfortable for people. Help ease this situation by asking questions only in private. When you cannot obtain enough information from the resident, you will need to speak with a family member.

Ask these questions about the resident's elimination habits:

- How often do you have a bowel movement?
- What time of day do you normally have a bowel movement?
- Is there anything I should know that will help you keep your normal schedule?
- How often do you urinate?
- Do you usually urinate in large or small amounts?
- Do you have a pattern of urinating at specific times of day?
- Do you wake up at night needing to urinate?
- Do you ever urinate and then find you have to go again soon after?
- Do you drip urine on your way to the toilet?

Review a resident's chart to learn their elimination patterns. This information is collected starting on the day of admission. If the resident has any problems with elimination, the care plan has information about how to care for them. The chart usually contains the following information:

- How often the person has a bowel movement
- The shift during which a resident usually has a bowel movement
- The amount, color, and consistency of the resident's stool
- The resident's urination pattern
- The amount and color of urine
- Any odor or pain with urination
- Information on incontinence

Promoting Regular Elimination Patterns

To support regular elimination, you must respond to call signals promptly and help residents to the bathroom as soon as you are asked. If a resident cannot ask, help them to the bathroom, when they awake in the morning, before and after meals, at bedtime, when they wake at night, and any other time you think they may have to go. Make sure residents eat a balanced diet and drink plenty of fluids, especially water. You can also do all you can to ensure that residents get enough rest and exercise.

Maintaining Residents' Dignity When Helping with Elimination

Elimination is a very private act. Like bathing or grooming, this is something the resident has always done in private. Residents have the right to dignity, respect, and privacy even when they need your help. Help maintain their dignity in these ways:

- Ask questions about elimination only in private.
- Maintain a professional attitude.
- Never use nicknames, slang, or unprofessional gestures to refer to elimination.
- Help residents in private. Close the door, pull the bedside curtains around the bed, and cover the person.
- Ask others to leave the room, if possible.
- Explain that you wear gloves as an important part of infection control and that this practice protects them as well as you.
- Empty bedpans and commodes and flush toilets immediately after elimination.
- Use an odor-control spray if needed. Control your reaction to any odors and remain professional as you provide care.

Equipment for Elimination

Some residents may need to use special equipment to help with elimination. Depending on their care plan, mobility, and health status, they may use the toilet, bedpan, urinal, or bedside commode. Using the bathroom toilet is easiest and the most familiar. A resident who cannot get to the bathroom may use a bedpan, urinal, or portable commode. With any of these, try to create an environment that feels as private as possible. Procedure 6-1 describes the steps used to help a resident use a bedpan, and Procedure 6-2 describes how to assist a male resident in using a urinal.

Bedpans are used by both male and female residents. A smaller fracture pan is often used for residents with hip or back problems (Figure 6-3). The bedside commode is a portable toilet. It is positioned beside the bed so the resident needs only to move from the bed to it. Most commodes are like a chair with a toilet seat cover and a container under the seat that catches the urine and stool (Figure 6-4). Procedure 6-3 outlines how to help a resident use a portable commode.



Figure 6-3 Examples of bedpans and a fracture pan.



Figure 6-4 Example of a portable commode.

Residents who have problems with incontinence may use disposable products such as panty liners, pads, or disposable briefs to prevent accidents. Talk with each resident about what they need. Speak with the charge nurse to see if the resident may have a medical problem that can be addressed.

Problems with Elimination

When you help a resident with elimination, watch for anything unusual. Listen to any problems a resident describes. Any changes or even a minor complaint could mean something serious that you should report to the charge nurse. Some problems might be easily resolved. Others require immediate medical attention.

6-1: Helping a Resident Use a Bedpan

REMEMBER: BE AWARE

ITEMS NEEDED

- Bedpan with cover
- Wash basin
- Two towels
- Two washcloths
- Soap
- Toilet paper
- At least three pairs of gloves
- Two plastic-covered pads or protective covers
- Body powder or cornstarch
- Disposable trash bag

Remember — if you contaminate your gloves in any way during the procedure, you must change to a new pair.

- 1** Put on gloves.
- 2** Put a pad or cover on the surface where you will put the bedpan after it is used.
- 3** Fold the bedspread and blanket down to the bottom of the bed, leaving the top sheet in place to cover the resident's lower legs. Help the resident lift their nightgown or remove pajama bottoms or underpants.
- 4** Put a protective cover under the resident's buttocks to protect the bed linen.
- 5** Ask the resident to bend both knees and lift their buttocks up while you slide the bedpan underneath them. Adjust it for the resident's comfort. Using powder or cornstarch on the bedpan prevents the resident's skin from sticking when the bedpan is removed. If the resident cannot lift their buttocks on their own, you can help them turn onto one side. Hold the bedpan flush against the buttocks. Have the resident turn back onto the bedpan or help them move back onto the bedpan. (You may need another staff member to help with moving the resident.)
- 6** Remove your gloves and dispose of them in the trash bag. Wash your hands.
- 7** Cover the resident with the top sheet for privacy.
- 8** Elevate the head of the bed slowly until the resident is in a sitting position. Ask the resident if they are as comfortable as they can be. Change the position of the bedpan if needed to make them comfortable.
- 9** Provide toilet paper and position the call light button so the resident can reach it. Tell them to call you when finished. If a resident cannot tell you they are finished, check on them every five minutes. Because a bedpan puts pressure on the skin, do not leave a resident on a bedpan longer than necessary.
- 10** Once the resident has finished with elimination, put on gloves.
- 11** Lower the head of the bed. Ask the resident to lift their buttocks up while you slide the bedpan out. If needed, help them roll onto one side while you hold the bedpan to prevent a spill. Move the bedpan to the covered surface.
- 12** If needed, help with wiping the perineal area. Put the used toilet tissue in the bedpan. You may need to wash the perineal area for some residents. Remember to wash, rinse, and dry thoroughly. (Some facilities may use premoistened disposable washcloths for this purpose. Others use a cleansing solution that is squeezed from a bottle over the perineal area.) Wash or wipe from front to back. Remove and dispose of the protective pad on the bed.
- 13** Remove your gloves and dispose of them in the trash bag. Wash your hands, and put on clean gloves.
- 14** Help the resident wash their hands. If perineal washing was done, change the water in the basin and use a fresh washcloth and towel for handwashing.
- 15** Remove your gloves and dispose of them in the trash bag. Wash your hands, and put on clean gloves.
- 16** Help the resident get dressed.

- 17** Put the bedpan cover on the bedpan and dispose of the contents in the resident's toilet. Clean the bedpan and return it to the bedside table. Remove and dispose of the protective pad on which you placed the bedpan. Most facilities have a water sprayer attached to the toilet for cleaning bedpans and urinals. Follow your facility's procedures for using this equipment. When you empty and clean the bedpan, be careful not to splash the contents.

- 18** Remove your gloves and place them in the disposable trash bag. Properly dispose of the trash bag, and wash your hands.

REMEMBER: UNDERSTAND

PROCEDURE

6-2: Helping a Male Resident Use a Urinal

REMEMBER: BE AWARE

ITEMS NEEDED

- Urinal
- Wash basin
- Towel
- Soap
- Toilet paper
- At least three pairs of gloves
- Plastic-covered pad or protective cover
- Disposable trash bag

Remember — if you contaminate your gloves in any way during the procedure, you must change to a new pair.

- 1** Put on gloves.
- 2** Put a pad or cover on the surface where you will put the urinal after use.
- 3** If the resident can stand beside the bed to use the urinal, help him to stand, and provide privacy. Put the call button within reach so he can call you when finished.

- 4** If the resident must use the urinal while in bed, fold the bedspread and blanket down to the bottom of the bed, leaving the top sheet over the resident. Help the resident lower his bottom clothing.

- 5** Place the urinal between the resident's legs at an angle to avoid urine spillage. Gently place the penis into the urinal.

- 6** Remove your gloves and put them in the trash bag. Cover the resident with the top sheet. Put the call button within reach so he can call you when finished. Check in a few minutes if he does not call you.

- 7** Wash your hands and put on new gloves.

- 8** When the resident is finished, remove the urinal and place it on the pad or protective cover.

- 9** If needed, help the resident wipe off excess urine with toilet tissue. Dispose of tissue and your gloves in the trash bag.

- 10** Wash your hands and put on new gloves.

- 11** Help the resident wash, rinse, and dry his hands.

- 12** Empty and clean the urinal, and replace it in the bedside table. Most facilities have a water sprayer attached to the toilet for cleaning bedpans and urinals. Follow your facility's procedures for using this equipment. When you empty and clean the urinal, be careful not to splash the contents.

- 13** Remove your gloves and place them in the disposable trash bag. Properly dispose of the trash bag, and wash your hands.

REMEMBER: UNDERSTAND

6-3: Helping a Resident Use a Portable Commode

REMEMBER: BE AWARE

ITEMS NEEDED

- Wash basin
- Towel
- Soap
- Toilet paper
- At least two pairs of gloves
- Disposable trash bag

Remember — if you contaminate your gloves in any way during the procedure, you must change to a new pair.

- 1 Position the commode by the bed. Place it so it will not move when you help the resident out of bed. You can place it against the wall or against the bedside table to keep it from moving.



- 2 Put on gloves.
- 3 Help the resident out of bed or out of a chair to a standing position. Help pull down the resident's lower clothing, and help them sit on the commode.
- 4 Provide toilet paper and put the call button within reach. Remove gloves.
- 5 If the resident needs help with wiping when finished, first put on gloves. Help with wiping, and throw the tissue into the commode or place in the trash bag.
- 6 Remove your gloves and dispose of them in the trash bag.
- 7 Help the resident with their clothing and to get back into the bed or chair.
- 8 Put on new gloves.
- 9 Help the resident wash, rinse, and dry their hands.
- 10 Remove the container from the commode and empty its contents into the resident's toilet. Most facilities have a water sprayer attached to the toilet. Follow your facility's procedures for using this equipment. When you empty and clean the commode container, be careful not to splash the contents.
- 11 Clean and dry the container and replace it in the commode.
- 12 Remove your gloves and place them in the disposable trash bag. Properly dispose of the trash bag, and wash your hands.

REMEMBER: UNDERSTAND

6-4: Applying a Disposable Incontinence Brief

 **REMEMBER: BE AWARE****ITEMS NEEDED**

- Disposable incontinence pads
- Disposable briefs
- Plastic trash bag
- Underpants (if resident wears underpants over the brief)
- Three pairs of gloves
- Two washcloths
- Towel
- Soap or perineal wash

Incontinence briefs are available in various types and sizes. Make sure to use the correct size for the resident.

- 1** Place an incontinence pad on the bed to protect clean linen.
- 2** Help the resident onto their back.

- 3** Put on gloves.
- 4** Help remove garments below the waist.
- 5** Discard the soiled incontinence brief in the plastic trash bag.
- 6** Remove and dispose of your soiled gloves.
- 7** Put on new gloves.
- 8** With the resident on their side, give perineal care, including cleaning the rectal area.
- 9** Remove and dispose of your soiled gloves.
- 10** Put on new gloves.
- 11** Fan-fold one-half of the brief under the resident's buttocks.

- 12** Help the resident move onto their back. Unfold the side that was fan-folded, and open the adhesive tabs on both sides. Place the brief upward between the resident's legs, and join the tab from the back of the brief to the tab in the front of the brief.
- 13** If the resident wears underpants over the brief, put these on, and help the resident put on their clothing.

Note: If a panty liner is used instead of briefs, use the same procedure but instead, place the liner over their buttocks. Then have the resident move onto their back, and bring the front of the liner up between their legs. Put on their underpants and help with other clothing.

 **REMEMBER: UNDERSTAND**

6-5: Urinary Catheter Care

 **REMEMBER: BE AWARE****ITEMS NEEDED**

- Gloves
- Cleaning solution
- Cotton balls or gauze pads
- Soap and water
- Washcloth
- Towel

Your responsibility for a resident with a catheter is to give routine perineal care and position the external catheter tubing and drainage bag.

- 1** Put on gloves before giving perineal care.
- 2** Always keep the external catheter tube as clean as possible.

- 3** Clean the tubing with antiseptic solution and cotton balls or gauze pads. Clean the tube first at the urethral opening, and then cleanse downward and away from the opening. To prevent discomfort for the resident, do not pull on the catheter tube while cleaning it.

- 4** Use only one cotton ball or gauze pad for each downward stroke. Discard it, and use a new one to clean the next area.

- 5** Do the rest of perineal care as usual, cleansing with soap and water from front to back.

- 6** Check the tubing for kinks and leaks.

- 7** The urinary drainage bag is secured to the bed or chair below the resident's bladder, so that the urine flows downward into the bag by gravity. Never let the drainage bag touch the floor, which is considered an unclean area. Never lift the drainage bag above the resident because urine could flow back into the bladder, increasing the risk of infection.

- 8** When you help a resident with a catheter change position, follow these guidelines: The external part of the catheter tube can be secured with a strap to the resident's upper thigh to prevent pulling on the catheter when they move. The urinary catheter tube, connecting tube, and drainage bag should not be separated except by a nurse using a sterile technique to change the tubing or collect a specimen. The drainage system is kept closed to help prevent infection.

 **REMEMBER: UNDERSTAND**

6-6: Emptying a Catheter Drainage Bag



REMEMBER: BE AWARE

ITEMS NEEDED

- Paper towels
- Gloves
- Measuring container
- I & O record

- 1 Put on gloves.
- 2 Place paper towels on the floor underneath the drainage bag.

- 3 Place the measuring container on the paper towels.
- 4 The drainage bag has a closed clamp that allows the urine to flow from the bag. Open the clamp and drain all the urine into the container, making sure not to touch the clamp to the sides of the container.
- 5 Close the clamp and secure it to the drainage bag immediately after it is completely drained.

- 6 Note the amount of urine and discard the urine in the resident's toilet.
- 7 Remove and discard your gloves, and wash your hands.
- 8 Record the amount of urine on the intake and output record.



REMEMBER: UNDERSTAND

DISCLAIMER: AHCA/NCAL has created this course to assist providers to recruit and train temporary staff during the national emergency caused by the coronavirus pandemic. Federal and/or state requirements may need to be waived to permit individuals under this training program in your location. Employers should check with their state survey agencies and their state occupational licensing agencies where applicable to ensure individuals trained under this program are permitted to assist with care in your location.