Enhancing Life
Jersey City Medical Center

Department of Patient Care Services

GUIDELINE: Fecal Management System	**DEVELOPED BY: Patient Care Services**
POLICY COMMITTEE: _____ Janice Kozzi MSN, RN, CNL Policy Committee Chair ❑ N/A	**APPROVED BY:** _____ Rita Smith, DNP, RN CNO, Senior Vice President Patient Care Services _____ Name: Title: Dept: Chair/Designee of Developing Committee

Effective Date:	**Revised Date:**	**Reviewed Date:**
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Distribution: **All patient care manuals**

Reference:

Flexi-Seal® Fecal Management System [package insert]. Princeton, NJ: Convatec, a Division or E.R. Squibb & Sons, LLC; 2009

Padmanabhan A, Stern M, Wishin J, Mangino M, Richey K, DeSane M, et al. Clinical evaluation of a flexible fecal incontinence management system. Am J Crit Care. 2007;16:384-93.

Approvals:

Professional Practice	Y 12/11	N/A ☐
Nursing Education	Y ☐	N/A ☐
Critical Care	Y 1/12	N/A ☐
Emergency Dept	Y ☐	N/A ☐
Peri-Op	Y ☐	N/A ☐
Trauma	Y ☐	N/A ☐
Maternal Child Health	Y ☐	N/A ☐
Behavioral Health	Y ☐	N/A ☐
Cardiac Cath Lab	Y ☐	N/A ☐
Interventional Radiology	Y ☐	N/A ☐

Med Exec	Y ☐	N/A ☐
Pharmacy/ P&T	Y ☐	N/A ☐
Pathology/Blood Bank	Y ☐	N/A ☐
Other: Quality and Safety	Y 12/11	N/A ☐
Other:	Y ☐	N/A ☐

PURPOSE:

To provide guidelines for the use of flexible fecal incontinence management system to divert and contain liquid (flowing) stool away from the body, reducing the risk of perineal dermatitis and transmission of nosocomial infection.

GUIDELINE:

1. **Licensed practitioner must evaluate indication and contraindications prior to ordering fecal management system**

2. **Licensed practitioner must evaluate and document necessity for fecal management system daily**

3. **The fecal management system must be re-ordered by the licensed practitioner every 7 days.**

4. **Only trained nursing staff may insert fecal management system.**

Indications:

1. Fecal management of patients with:
    a. Little or no bowel control
    b. Liquid or semiliquid stool
2. Order by licensed practitioner is required

Contraindications:

1. This product is not intended for use
    a. For more than 29 consecutive days
    b. For pediatric patients
    c. Solid or soft formed stool

2. Contraindications to the fecal management system
    a. Suspected or confirmed rectal mucosal impairment (i.e. severe proctitis, ischemic proctitis, mucosal ulcerations)
    b. Rectal surgery within the last year

c. Rectal or anal injury
d. Severe hemorrhoids and/or symptoms
e. Rectal or annals stricture or stenosis
f. Suspected or confirmed rectal/ anal tumor
g. An in-dwelling rectal or anal device (e.g. thermometer) or delivery mechanism (e.g. suppositories or enema) in place
h. sensitivity or allergic reaction to any component of the kit

Observations and precautions:

1. Under no circumstances should the balloon be inflated with more than 45 ml

2. observe the device frequently for obstructions and kinks, solid fecal particles, or external pressure

3. Take note of the position indicator line located relative to the patient's anus
    a. Regularly observe for changes in the location of the indicator line to determine movement of the retention balloon
    b. May indicate the need for the balloon or device to be repositioned

4. Close attention should be exercised in patient with inflammatory bowel conditions or previous colon rectal surgery.
    a. Licensed practitioners should determine the degree and location of inflammation or extent or injury (e.g. location of anastamosis) prior to considering the use of this device

5. Use caution when using the device in patients who are high risk for bleeding (e.g. anticoagulation/ antiplatelet therapy)
    a. Remove device immediately and call the physician if signs of rectal bleeding occur

6. Notify the licensed practitioner immediately if any of the following occur:
    a. Rectal pain
    b. Rectal bleeding
    c. Abdominal symptoms such as distension or pain

7. Small amounts of moisture or seepage around the catheter is anticipated. Use skin care protocol to avoid skin irritation

8. Remove the device if
    a. The catheter becomes blocked with feces

b. The patient’s bowel control, consistency and frequency returns to normal

Note: See package insert for preparation, insertion of device, and full description of precautions and adverse events.