

# Bowel Elimination Record

S

**Bowel Movement Codes:**

- O –No Bowel Movement
- V –Verbal report of BM by Individual
- LH–Large Hard
- LS–Large Soft
- LL–Large Loose
- MH–Medium Hard
- MS–Medium Soft
- C –Colostomy bag changed

- X –Not Observed (i.e., independent/semi-independent, non-verbal)
- ML– Medium Loose
- SH– Small Hard
- SS– Small Soft
- SL – Small Loose
- W –Watery
- A –Absent (off home for appointment, hospitalization, recreation, etc.)
- CW–Colostomy wafer changed

**PRN Interventions:**

- S –Suppository given
- F –Fleets given
- SE –Saline enema
- L –Laxative (P.O.)
- D –Digital Exam
- IR–Impaction Removal

A

**Check appropriate:**

- Independent in all areas of toileting (*requires no verbal prompts, no assistance with clothing, completely independent with all aspects*)
- Semi-Independent requires some assistance (*requires help with clothing, needs verbal prompts, staff may or may not see bowel movement*)
- Requires Total Assistance (*requires staff assistance in all areas including hygiene, clothing, staff sees bowel movement or individual incontinent*)
- Colostomy / Ileostomy (*circle appropriate*)

0's carried from previous month \_\_\_\_\_ Give suppository ordered after \_\_\_\_\_ Consecutive 0's.

M

**Bowel Management Support:**

Fluids: \_\_\_\_\_ Fiber: \_\_\_\_\_

Current Bowel Medications: \_\_\_\_\_

Bowel Medication Changes During Month: \_\_\_\_\_

Bowel Movement	Shift	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
	Charted by Direct Care	am																															
<b>Code Only</b> – no initials	pm																																
Colostomy bag/wafer changed	night																																
PRN Interventions	am																																
	pm																																
Code/Initials	night																																
<b>Name</b>		<b>Agency</b>										<b>Month</b>										<b>Year</b>											

## Bowel Elimination Record

Date	Comments
S	
A	
M	

Initials	Signature	Initials	Signature
		P	
			L
			E

<b>Name</b>	<b>Agency</b>	<b>Month</b>	<b>Year</b>
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