

Status: Standard Procedure: specifies the procedures to be followed, only in exceptional circumstances should these not be followed.	Policy No: CLSP 31 Revision No: Date Approved: 01/03/11 Review Date: 01/03/13
Title: Standard Procedure for the Administration of Suppositories to Cheshire Ireland Service Users.	
Written by: Clinical Practice Project Group	
Approved by:	
Cross Reference: BPH 02, ICOG 1, ICOG 2	

1.0 Purpose

The purpose of this standard procedure is to ensure the safe administration of suppositories to Cheshire Ireland service users.

2.0 Scope

All Cheshire services where service users may require suppositories administered by Cheshire Ireland staff.

3.0 Responsibility

- It is the responsibility of all staff who administer suppositories to follow this standard procedure.
- It is the responsibility of service managers to ensure staff are familiar with the standard procedure and to monitor compliance.
- In line with the Best Possible Health care plan, each service user has an up to date continence assessment care plan.

4.0 Definitions

Suppositories are solid or semisolid pellets introduced into the anus to stimulate bowel action or administer medication i.e. to soothe haemorrhoids or anal itching.

5.0 Procedure

Equipment

- Choice of Suppository product as prescribed by the medical practitioner
- Disposable gloves/apron
- KY jelly/gauze swab
- Disposable incontinence pad.

Procedure

- Ensure privacy for the procedure.
- Explain the procedure to the service user and ensure they understand and consent to the procedure.
- Ask the service user to empty their bladder.
- Ensure the bedpan/toilet/commode is available.
- Wash and dry hands thoroughly.
- Apply disposable gloves/apron.
- Place the service user close to the edge of the bed, on the left side with knees bent, the upper leg higher than the lower.
- Place the incontinence pad under the buttocks.
- Put KY jelly on swab, ask the service user to breathe normally and try to relax.
- Ask the service user to try to retain the suppositories for about 15 to 20 minutes before evacuating the bowel.
- Ensure the service user has access to the call system and the toilet/assist where necessary.
- Remove and dispose of all equipment.
- Wash and dry hands thoroughly.
- Record the procedure and its result in the Best Possible Health Bowel Record Chart. Ensure that the procedure and its result are documented using the Bristol Stool Chart.
- Record the administration of the suppositories in the Medication Administration Chart.
- Report any adverse reactions observed and record in Best Possible Health Daily Continuation Sheet/to lead clinical person/line manager/G.P.

5.1 Troubleshooting Guidelines:

Special caution must be shown if the service user has any of the following:

- Inflammatory bowel disease (e.g. Crohn's disease or ulcerative colitis).
- Any anorectal condition, which may cause pain or bleeding e.g. anal fissure, severe haemorrhoids (third or fourth degree haemorrhoids).
- Autonomic dysreflexia.
- Blood in faeces, weight loss, abdominal pain.
- Changes in the frequency, colour and consistency of the stools.

6.0 References

Mallett, J. & Dougherty, L. (2000). *The Royal Marsden Hospital Manual of Clinical Nursing Procedures*. Blackwell Publishing, Oxford.

Nicol, M., Bavin, C., Bedford-Turner, S., Cronin, P. & Rawlings-Anderson, K. (2004), *Essential Nursing Skills*, Mosby, United Kingdom.

Robertson, B. & O'Kell, S. (1995). *Study Guide for Health and Social Care Support Workers*, First Class Books Pub., Bristol.

Bowel Care, Spinal Injuries Ireland.