

## DIARRHEA

### I. POLICY:

- Function:** Assess, differentiate, and plan interventions for the presentation of a patient with diarrhea.
- Circumstances:**
1. Initial history and assessment of status to be done when the patient presents, with more thorough evaluation to be done in the clinic exam area.
  2. Supervision: none required.
  3. Patient contraindications: known allergies to any medications indicated in the protocol.
- Purpose:** To provide appropriate assessment and management of patients with diarrhea within the jail setting.
- Policy Affects:** All RN classifications assigned to Jail Health Services.

### II. PROTOCOL:

- A. Definition:** Increased volume, fluidity, or frequency of bowel movements relative to the person's usual pattern. Because the etiology of diarrhea is varied, it is important to look at the overall clinical picture before treatment is initiated.
- Diarrhea is usually a self-limited disorder, usually viral. The most important goal of therapy is to prevent dehydration.

#### B. Data Base:

1. **Subjective (History/Symptoms):**  
Determine onset, duration, and nature of symptoms and possible precipitating factors.  
**Document:**
  - watery stools
  - bloody stools
  - number of stools daily
  - cramping
  - nausea or vomiting
  - fever
  - past medical history (HIV status, irritable bowel syndrome, diabetes, history of abdominal surgeries, etc.)
2. **Objective (Physical Assessment):**  
Document overall general appearance, note distress.  
**Vital Signs:**
  - temperature
  - orthostatic BP and P lying and then again after standing 2 full minutes**Note:**
  - abdominal distension
  - increased tympany
  - abdominal pain on palpation
  - hydration status, i.e., mucous membranes dry or skin tenting
  - height and weight
  - urine chemstick

#### C. Plan (Intervention):

- Vital signs bid until condition resolved.
- Fibercon 625 mg, 2 tabs po bid prn x 5 days.

- If bloody or mucopurulent stools or bilirubinuria:
  - refer to MD/NP during clinic hours or isolate and refer to next sick call.
- If temperature  $>101^{\circ}$ :
  - refer to MD/NP during clinic hours or next sick call
  - temp checks tid until normal x 3
  - Acetaminophen (Tylenol) 500mg, 2 tabs po tid prn x 5 days
- If patient is pregnant or if symptoms persist more than 2-3 days beyond initial assessment without improvement:
  - refer to next MD/NP sick call
- Refer to MD/NP during clinic hours, or contact MD on call if:
  - patient is dehydrated and cannot keep fluids down
  - if urine chemstick is positive for 2+ or greater ketones
  - if orthostatic changes is  $> 50$  POINTS (combine pulse and BP).
- Alcohol Detox: See Standardized Procedure
- Heroin Withdrawal: See Standardized Procedure
- Acute Abdominal Disorders: See Standardized Procedure
- Dehydration: See Standardized Procedure

D. Patient Education (Health Promotion):

- Advise patient to increase po fluids, but to avoid coffee.
- Advise careful handwashing for infection control.
- Advise patient to inform nursing staff if symptoms do not improve or they worsen.

E. Follow-up (Re-evaluation):


PRN


III. REQUIREMENT FOR REGISTERED NURSE:

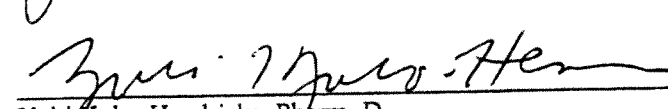
- A. Education and Training: graduate of an accredited school of nursing.
- B. Additional training in physical assessment and emergency interventions.
- C. On-going evaluation: Random chart reviews by Nurse Managers and/or Medical Director, and an annual performance review.

IV. DEVELOPMENT AND APPROVAL OF THE STANDARDIZED PROCEDURE:

- A. This Procedure was developed collaboratively and has been approved by the following:

  
Joe Goldenson, M.D.  
Director/Medical Director  
4/9/02  
Date

  
Jackie Clark, RN, MS.  
Nurse Manager  
4/10/02  
Date

  
Yuki Kubo-Hendricks, Pharm. D.  
Pharmacy Director  
4/10/02  
Date

B. Review Schedule: As needed, but at least annually.

V. REGISTERED NURSES AUTHORIZED TO UTILIZE THIS PROCEDURE:

The list of registered nurses authorized to utilize this procedure with dates of initial and follow-up evaluations is to be maintained at the nurses' primary job site and at the Forensic Services Staff Development office.