If outcomes are not achieved, the nurse should explore the reasons. The nurse might consider some or all of the following questions:

- Were the client’s fluid intake and diet appropriate?
- Was the client’s activity level appropriate?
- Are prescribed medications or other factors affecting the gastrointestinal function?
- Do the client and family understand the provided instructions well enough to comply with the required therapy?
- Were sufficient physical and emotional support provided?

### NURSING CARE PLAN

#### Altered Bowel Elimination

**ASSESSMENT DATA**

**Nursing Assessment**

Mrs. Emma Brown is a 78-year-old widow of 9 months. She lives alone in a low-income housing complex for elders. Her two children live with their families in a city approximately 150 miles away. She has always enjoyed cooking for her family; however, now that she is alone, she does not cook for herself. As a result, she has developed irregular eating patterns and tends to prepare soup-and-toast meals. She gets little exercise and has had bouts of insomnia since her husband’s death. For the past month, Mrs. Brown has been having a problem with constipation. She states she has a bowel movement about every 3 to 4 days and her stools are hard and painful to excrete. Mrs. Brown decides to attend the health fair sponsored by the housing complex and seeks assistance from the county public health nurse.

**Physical Examination**

- Height: 162 cm (5′4″)
- Weight: 65 kg (143 lb)
- Temperature: 36.2°C (97.2°F)
- Pulse: 82 BPM
- Respirations: 20/minute
- Blood pressure: 128/74 mm Hg
- Active bowel sounds, abdomen slightly distended

**Diagnostic Data**

- CBC: Hgb 10.8
- Urinalysis negative

**NURSING DIAGNOSIS**

Constipation related to low-fiber diet and inactivity (as evidenced by infrequent, hard stools; painful defecation; abdominal distention)

**DESIRABLE OUTCOMES**

Bowel Elimination [0501], as evidenced by

- Comfort of stool passage
- Stool soft and formed
- Passage of stool without aids

**NURSING INTERVENTIONS*/SELECTED ACTIVITIES**

**Constipation/Impaction Management [0450]**

- Identify factors (e.g., medications, bed rest, diet) that may cause or contribute to constipation.
  - Assessing causative factors is an essential first step in teaching and planning for improved bowel elimination.

- Encourage increased fluid intake, unless contraindicated.
  - Sufficient fluid intake is necessary for the bowel to absorb sufficient amounts of liquid to promote proper stool consistency.

- Evaluate medication profile for gastrointestinal side effects.
  - Constipation is a common side effect of many drugs including narcotics and antacids.

- Teach Mrs. Brown how to keep a food diary.
  - An appraisal of food intake will help identify if Mrs. Brown is eating a well-balanced diet and consuming adequate amounts of fluid and fiber. Excessive meat or refined food intake will produce small, hard stools.

- Instruct Mrs. Brown on a high-fiber diet, as appropriate.
  - Fiber absorbs water, which adds bulk and softness to the stool and speeds up passage through the intestines.

- Instruct her on the relationship of diet, exercise, and fluid intake to constipation and impaction.
  - Fiber without adequate fluid can aggravate, not facilitate, bowel function.
## NURSING INTERVENTIONS*/SELECTED ACTIVITIES

### RATIONALE

<table>
<thead>
<tr>
<th>NURSING INTERVENTIONS*/SELECTED ACTIVITIES</th>
<th>RATIONALE</th>
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<tbody>
<tr>
<td>Exercise Promotion [0200]</td>
<td></td>
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<tr>
<td>Encourage verbalization of feelings about exercise or need for exercise.</td>
<td>Perceptions of the need for exercise may be influenced by misconceptions, cultural and social beliefs, fears, or age.</td>
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<tr>
<td>Determine her motivation to begin/continue an exercise program.</td>
<td>Individuals who have been successful in an exercise program can assist Mrs. Brown by providing incentive and enhancing motivation. For example, a walking partner may be beneficial.</td>
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<tr>
<td>Inform Mrs. Brown about the health benefits and physiologic effects of exercise.</td>
<td>Activity influences bowel elimination by improving muscle tone and stimulating peristalsis.</td>
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<tr>
<td>Instruct her about appropriate types of exercise for her level of health, in collaboration with a primary care provider.</td>
<td>Any individual beginning an exercise program should consult a primary care provider primarily for a cardiac evaluation. Mrs. Brown’s age and lack of activity should be considered in planning the level of activity.</td>
</tr>
<tr>
<td>Assist Mrs. Brown to set short-term and long-term goals for the exercise program.</td>
<td>Realistic goal setting provides direction and motivation.</td>
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### EVALUATION

Outcome not met. Mrs. Brown has kept a food diary and is able to identify the need for more fluid and fiber but has not consistently included fiber in her diet. She has started a walking program with a neighbor but is only able to walk for 10 minutes at a time twice a week. She states her last bowel movement was 3 days ago.

*The NOC # for desired outcomes and the NIC # for nursing interventions are listed in brackets following the appropriate outcome or intervention. Outcomes, interventions, and activities selected are only a sample of those suggested by NOC and NIC and should be further individualized for each client.

### APPLYING CRITICAL THINKING

1. You learn that Mrs. Brown’s stools have been liquid, in very small amounts, and at infrequent intervals, generally occurring when she feels the urge to defecate. What additional data are important to obtain from her?
2. What nursing intervention is most appropriate before making suggestions to correct or prevent the problem she is experiencing?
3. What suggestions can you give her about maintaining a regular bowel pattern?
4. Explain why cathartics and laxatives are generally contraindicated for people in Mrs. Brown’s situation.

See Critical Thinking Possibilities in Appendix A.