Nursing Implications for Diagnostic Tests

Colonoscopy

**Client Preparation**
- Ensure presence of a signed informed consent for the procedure.
- A liquid diet may be prescribed for 2 days prior to the procedure, and the client is usually NPO for 8 hours just before the procedure.
- Administer or instruct the client in bowel preparation procedures such as taking citrate of magnesia or polyethylene glycol the evening before.
- Sedation is usually given during the procedure.

**Client and Family Teaching**

*Before Procedure*
- Explain dietary restrictions and their purpose.

**Medication Administration**

**Laxatives and Cathartics**

**BULK-FORMING AGENTS**
- Bran
- Calcium polycarbophil (Fibercon)
- Methylcellulose (Citrucel)
- Psyllium hydrophilic mucilloid (Metamucil, Effer-Syllium)

Bulk-forming agents are the only safe laxatives for long-term use. They contain vegetable fiber, which is not digested or absorbed in the gut. This natural fiber creates bulk and draws water into the intestine, softening the stool mass.

**Nursing Responsibilities**
- Mix the agent with a full glass of cool liquid just prior to administering.
- Do not administer to clients with possible stool impaction or bowel obstruction.

**Client and Family Teaching**
- Drink at least 6 to 8 full glasses of nonalcoholic fluid per day. Adequate hydration is necessary to produce the drugs laxative effect.
- These agents may be mixed with water, milk, or fruit juice.
- Take the drug in the morning or with meals. To reduce the risk of impaction, do not take at bedtime.
- Because of the increased risk of impaction, check with the physician before increasing dietary fiber while you are taking these agents.

**WETTING AGENTS**
- Docusate (Colace, Surfak, Doxidan, others)

Wetting agents reduce stool surface tension and form an emulsion of fat and water, softening the stool. They are used primarily to prevent straining and reduce the discomfort of expelling hard stools.

**Nursing Responsibilities**
- Administer with ample fluids to promote softening effect.

- Wetting agents may alter the absorption of other drugs. Do not administer within 1 hour of other oral medications.
- Do not attempt to crush or open caplets; a liquid form is available for clients who cannot swallow pills or capsules.

**Client and Family Teaching**
- Do not use for more than 1 week or less unless specifically recommended by the physician.
- Take the medication in the morning or evening, but avoid taking it with other medications.
- Adequate fluid is necessary to obtain the beneficial effect of the drug. Drink 6 to 8 glasses of nonalcoholic fluid per day.

**OSMOTIC AND SALINE LAXATIVES/CATHARTICS**
- Lactulose (Rhodialose)
- Sorbitol
- Magnesium hydroxide (Milk of Magnesia)
- Magnesium citrate
- Polyethylene glycol (Klean-Prep)

Laxatives in this group contain poorly absorbed salts or carbohydrates that remain in the bowel, increasing osmotic pressure and drawing water into the intestine. Stool volume increases, consistency decreases, and peristalsis is stimulated. Many of these agents also have an irritant effect on the bowel, further stimulating peristalsis. They are used to stimulate rapid or complete bowel evacuation to relieve constipation and to prepare the bowel for diagnostic and surgical procedures. They should be limited to acute, short-term use; chronic use may suppress normal bowel reflexes.

**Nursing Responsibilities**
- Assess for possible contraindications to osmotic or saline laxatives, including bowel ulceration or obstruction, dehydration, electrolyte imbalances, heart failure (which may be aggravated by the sodium content), or renal failure.
- Administer with a full glass of liquid, preferably in the morning to avoid sleep disturbance.