

Mega-Concept: Health and Illness

Category: Homeostasis and Regulation

**Concept Name:** Elimination

## **Concept Definition:**

Factors and conditions that influence the removal of waste through the gastrointestinal and urinary systems.

## **Scope and Categories:**

• **Scope:** Gastrointestinal and urinary elimination ranging from normal function to dysfunction or a disease process that impairs/alters elimination.

## Categories:

- Control-Issues that affect elimination control:
  - Developmental
  - o Cognition
  - Maturation
- Retention-Issues that affect retention:
  - Maturation
  - Physiologic
- o Discomfort:
  - Psychological factors
  - o Physical disorders (infection, obstruction or retention)

## **Risk Factors:**

Concept relates to all persons, regardless of age, gender or race.

## **Populations at Risk:**

- Youth: normal physical and emotional development. Enuresis
- Adult: Pregnancy related elimination alterations, both urinary and bowel



 Elderly: Decreased motility, dehydration, and increased risk of obstruction and loss of control

#### **Individual Risk Factors:**

- Altered mobility: Mobility or immobility affects the physiologic function of the gastrointestinal tract. In addition immobility can result in loss of control of elimination
- Cognitive impairment: Disorders, such dementia or injury, that prevent the patient from recognition of the need to eliminate.
- Developmental stage: Beginning and ending of life issues such as immature maturation, immature cognition, and loss of functional ability.
- Immunological impairment or infection: Disorders concerned with autoimmune function or infections.
- Medical Conditions general and specific to the gastrointestinal or urologic systems.
- Trauma to neurologic or musculoskeletal system that interferes with continence.
- Stress and anxiety can result in retention, frequency, or incontinence.
- Hypoperfusion states resulting in decreased renal function and necrosis of bowel.
- Medications or other substances can affect elimination function

### **Physiological Processes:**

- Normal urinary elimination: renal function is glomerular filtration, renal perfusion, and hydration.
- Normal bowel elimination: intact GI system, peristalsis, nutrition, hydration, and normal flora.
- Urinary and bowel control: intact cognition, neuromuscular function, developmental and maturational factors.

### **Pathophysiological Processes and Consequences:**

- Urinary incontinence: stress incontinence, skin breakdown.
- Bowel incontinence: skin breakdown, social isolation
- Inflammatory bowel disease
- Urinary retention: discomfort, infection, renal lithiasis, obstructive renal failure
- Bowel retention: Constipation, laxative abuse, impaction, bowel obstruction, ileus, hemorrhoids, discomfort
- Bowel perforation if constipation is not addressed

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Urinary tract infection (UTI)

### **Assessment/Attributes:**

### Subjective:

- History, including specific GI or urinary health conditions: frequency of infections, changes of patterns
- Medication history
- Nutritional and diet assessment
- Recent changes in health status
- Level of cognition: dementia
- Problems with continence (urine or stool): change in control.
- Pain: abdominal pain, costovertebral angle pain, flank pain, dysuria, painful urination or passage of stool
- Mobility: musculoskeletal dysfunction, sedentary lifestyle.
- Psychosocial: anxiety, stress
- Cultural influences: hygiene practices, accessible toileting, privacy

## **Objective:**

- Physical assessment
  - Appearance of stool and urine
  - Bladder distention
  - Appearance of perirectal area
  - Surgical diversions
  - Abdominal distention
  - Bowel sounds

### **Diagnostic Tests:**

- Lab tests: Renal function, BUN, creatinine, creatinine clearance, electrolytes, urinalysis, urine or stool cultures, occult blood (stool), ova and parasites, fat content of stool.
- Biopsy: rectum, colon, bladder or kidney
- Radiographic scans/x-rays/ultrasound: nuclear medicine, KUB, IVP, MRI, CT scan with and without contrast.
- Direct observation: colonoscopy, sigmoidoscopy, cystoscopy, uroscopy

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 Special tests: Bladder stress testing, urine flow studies, post-void residual, urodynamic, bladder scan

## **Clinical Management - Interdisciplinary:**

### **Primary:**

- Education promoting healthy bowel and bladder function
  - High fiber, low fat diet
  - o Adequate fluids
  - Regular physical activity
  - Caffeine limitations
  - Tobacco cessation

#### Secondary:

- Screening: routine occult blood and colonoscopy.
  - Genetic screening: celiac disease
  - Prostrate hypertrophy

#### **Tertiary:**

- Altered Urinary/Bowel Elimination: Risk for Impaired Skin Integrity
- Pharmacologic Treatment: anti-infectives, anticholinergics, diuretics, laxatives, antidiarrheal, probiotics, analgesics
- Incontinence Management: condom catheters, incontinent products, bowel and bladder training
- Invasive procedures: intermittent or continuous catheterization, rectal tubes
- Surgical procedures: diversions, prostatectomies, colporrhaphy

#### **Interrelated Concepts:**

- Nutrition: High fiber and low fat promotes healthy bowel activity
- Fluids and Electrolytes: Diarrhea and overuse of diuretics results in loss of fluid and electrolytes
- Development: Control of bowel and bladder
- Mobility: Activity stimulates peristaltic activity which promotes bowel elimination
- Acid Base:
  - Diarrhea
  - Vomiting

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• Renal failure

• Infection: Urinary tract infection (UTI)

• Inflammation: Related to infectious processes

## **Exemplars:**

# **New Mexico Nursing Education Consortium (NMNEC) Required Exemplars:**

- Bladder Incontinence/Retention
- Bowel Incontinence/Retention

### **Resources:**

- Gallagher, D.L. and Harding, M.M. (2016). Lower Gastrointestinal Problems. In S. Lewis, et. al. (Eds.), *Medical-surgical nursing: assessment and management of clinical problems* (10<sup>th</sup> ed.). Elsevier.
- McKenzie, C. (2017). Elimination. In J. F. Giddens (Ed.), *Concepts for nursing practice* (2<sup>ND</sup> ed.) (pp. 156-166). Mosby/Elsevier.
- National Institute of Diabetes and Digestive and Kidney Diseases. (2019). Digestive diseases. Retrieved from <a href="https://www.niddk.nih.gov/health-information/digestive-diseases?dkrd=lgdmn0027">https://www.niddk.nih.gov/health-information/digestive-diseases?dkrd=lgdmn0027</a>
- National Institute of Diabetes and Digestive and Kidney Diseases. (2019). Kidney Disease.

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- Parsell, S.T. (2016). Renal and Urologic Problems. In S. Lewis, et. al. (Eds.), *Medical-surgical nursing: assessment and management of clinical problems* (10<sup>th</sup> ed.), Elsevier.