

icons

Identifying Continence Options after Stroke

Prompted voiding protocol

Overview

The objectives of the prompted voiding protocol are to:

- help patients learn how to identify the cues to bladder fullness and to request assistance if needed.
- help patients to develop
 - an increased ability to control voiding
 - an increased sense of control over their toileting practices
 - an increased motivation to use the toilet appropriately.

Please implement the protocol for 14 hours a day (7.30am to 9.30pm), 7 days a week.

Protocol

Patient education

Go through the Patient Education booklet with the patient; family and/or friends can be present if the patient would like them to be.

Bladder diary review

The patient (or nursing staff if the patient is not able) will have completed a baseline bladder diary for at least three days. At the first discussion with the patient (following the explanation of the patient education materials), review the baseline bladder diary with the patient, noting the time and circumstances of each accident.

Prompted voiding

1. depending on findings from the bladder diary, decide (in consultation with the patient if possible) on an appropriate initial toileting interval: this is likely to be either every two or every three hours.
2. approach patient at this interval (e.g. every 2 hours) during waking hours and ask if he or she is wet or dry.
3. check the patient to see if his or her undergarment or pad was wet or dry.
4. give the patient feedback on the correctness of his or her response and praise the patient if dry.

Suggested wording:

Feedback as to accuracy: "That's right, Mrs X, you are dry."

Praise if the patient is dry: "Good, you're dry. Isn't that more comfortable?"

5. ask the patient if he or she would like to use the toilet

Suggested wording:

This should ensure that the patient is given the best opportunity to request assistance, e.g. "Mrs ---, do you need to go to the bathroom?"

6. if the patient's response was yes, take them to the toilet. If the response was no, encourage the patient to toilet, but not to force him or her to do so.
7. provide toileting assistance as needed.
8. provide positive feedback for appropriate toileting.
9. end the prompting session by telling the patient that the staff will return at the specified interval (e.g. in two hours) and to be sure to ask for assistance if they need to go to the toilet before then.

Please document all activities (e.g. taking patients to the toilet and the outcome of each scheduled void) on the DAILY TREATMENT LOG for each patient.

Note: prompt patients to hold their urine until the next check, but tell them that if they needed to use the toilet before that time they should inform the nursing staff so that appropriate assistance can be provided and data recorded.

Review

Review patient at weekly intervals using

- bladder diary
- log of prompted voiding activities in the last week.

If patient was dry on 80% of prompts, increase interval by half an hour.

If the patient had a time of day (often in the morning) when he or she was consistently wet on the specified interval, add an extra prompt.

Decide on voiding schedule for the following week and document this in the back of the Patient Information Booklet and in the nursing care plan.

Maintenance

Weekly progress reviews are an ideal time to discuss progress with patients and to provide support and encouragement to help motivate patients to continue with their schedule.