

## What is a rectal irrigation?

A rectal irrigation is done to get stool (poop) and gas out of intestines. It may be done:

- to prevent a serious infection in the intestines called enterocolitis. This infection can happen if your child has Hirschsprung Disease.
- if your child's belly gets puffy.
- if your child has a hard time pooping.

## How is it done?

- A tube is put into the anus and rectum. Air and stool can then drain out.
- Normal saline solution is put into the rectum through the tube.
- The saline then drains out.

These steps are repeated several times until your child's tummy is soft and the stool is clear.

## Supplies needed

- Rectal tube. Your child's nurse will tell you the size of your child's tube.
- Normal saline solution.
- Water-soluble lubricant like KY Jelly®.
- 2 small tubs.
- 60cc syringe.
- Towel for your child to lie on.

## **ALERT - Never use tap water for irrigation. Always use normal saline solution.**

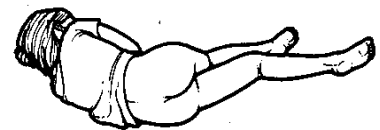
This is important because normal saline solution contains salt. If the entire amount of saline solution does not drain out during the irrigation, it will not hurt your child. Tap water does not have salt. If the tap water does not drain out, it could be absorbed by your child's body. This could affect your child's normal blood salt (electrolyte) level.

You can make your own normal saline solution. Add 2 teaspoons of table salt to one quart (1000 mL) of water.

## Getting ready

You may need a helper to do this procedure.

1. Get the supplies.
2. Tell your child what you are going to do. Let your child watch a video or listen to music while doing this procedure. You may place an infant on their back with their legs in a frog position.
3. Wash your hands.
4. Fill the 60 cc syringe with the normal saline solution.
5. Have your child lie on the towel - either on the floor or on a bed. Have your child lie on the left side.



## Doing the rectal irrigation

1. The nurse will tell you the **least** amount of normal saline to use for **each** irrigation.
2. Use the water-soluble lubricant to lubricate the tip of the rectal tube.

3. Put the rectal tube in about 5 inches. Do this gently and slowly. It may be helpful to have another person help distract your child while you put in the tube.
4. Stool may come out as you put in the tube. Let stool drain into the tub.
5. Connect the syringe to the rectal tube. Gently push down on the plunger of the syringe to push in 20 mL of the saline solution.
6. Pinch the tube to stop the flow of saline. Remove the syringe.
7. Let the stool and solution drain into the tub. Gently press on your child's abdomen while the stool is draining.
8. Repeat this, moving the tube in 2 to 3 inches with each 20mL of fluid you push in. Try to get the tube in almost to the "y" part. The nurse can show you where this is on the tube.
9. If stool and fluid have not drained, attach an empty 60mL syringe. Gently pull back on the plunger to remove stool from the intestine. If you feel resistance, stop. Move the catheter and try again.
10. You may need to slide the tube in or out a little bit to get the fluid to drain out of the rectum completely.
11. When all the fluid comes back clear, the irrigation is done. You should have used **the least or more than the least** amount of normal saline. Remove the rectal tube.



### After the rectal irrigation

1. You do not need to measure the amount of stool that you get back.
2. Clean your child's butt to remove any stool.
3. Praise your child for cooperating during the irrigation. For example, say: "You were very upset during the irrigation but you didn't kick your feet. That was really good."
4. Wash supplies with warm soapy water. You may reuse them for the next rectal irrigation.
5. Flush the dirty liquid in a toilet.

### How often is it needed?

Your child's nurse will tell you how often the doctor has ordered the irrigations.

**ALERT:** Call your child's doctor, nurse, or clinic if you have any concerns or if your child:

- Shows signs or symptoms of enterocolitis. This includes swollen stomach, rectal bleeding, nausea, throwing up, and diarrhea.
- Does not tolerate rectal irrigation.
- Cannot be irrigated because you have a hard time doing the irrigation.
- Does not get better after rectal irrigation.
- Needs these irrigations a lot.
- Has special health care needs that were not covered by this information.

**This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up**