

Bowel Function in Surgical Oncology Patients: More Than Auscultation
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Problem: Nurses were not consistently auscultating bowel sounds for five minutes in each abdominal quadrant.

Evidence: Madsen, et. al. (2005) posited in her evidence based practice project that the return of bowel sounds does not represent a coordinated effort by the bowel to return to its usual motility. When polled by Madsen's team, physicians ranked return of flatus, bowel movement and appetite as the most important factors in assessing the gastrointestinal system. Seventy eight percent of these physicians stated that bowel sounds assessment was not helpful in patient assessment.

Strategy: Madsen, et. al. (2005) developed eight criteria for the nurse to use in patient assessment: presence of abdominal pain or discomfort; flatus in the past 8 hours; bowel movement within the last 12-24 hours; nausea and/or vomiting; feeling bloated; return of appetite; abdominal cramps and referred pain. These criteria were incorporated into the assessments of all patients on the unit.

Practice change: Nurses were queried regarding workload changes using the criteria and quality of information. Nurses felt that these criteria were easily incorporated into their assessments and did not increase their workload.

Evaluation: Charts were reviewed for common criteria that were present on the day of patient discharge.

Results: Thirty patient charts were reviewed on the day of discharge. Nurse assessments and physician's notes were reviewed. The patients were discharged if there was a bowel movement, absence of nausea and vomiting for 24 hours and if the patient tolerated at least a full liquid diet.

Recommendations: Auscultating bowel sounds should be used as part of a focused assessment and not a routine basic assessment. Bowel sounds support the overall clinical picture but are not a decision- making criteria in of themselves.

Behrns, K.E., [Kircher, A.P.](#), [Galanko, J.A.](#), [Brownstein, M.R.](#) & [Koruda, M.J.](#) (2000). Prospective randomized trial of early initiation and discharge on a liquid diet following intestinal surgery. **Journal of gastrointestinal surgery**. **4**, pp. 217-221.

Kirton, CA. (1997). Assessing bowel sounds. **Nursing**. **27**, pp. 64.

Madsen, D., Sebolt, T., Cullen, MA et. al. (2005). Listening to bowel sounds: an evidence based practice project. **American Journal of Nursing**. **12**, pp. 40-49.

Mehta, M.(2003). Assessing the abdomen. **Nursing**. **33**, pp. 54-55.