

## **CONTINENCE CARE: EVIDENCE BASED BLADDER MANAGEMENT FOR STROKE PATIENTS: THE NURSE-PATIENT PARTNERSHIP TO MANAGE AND PREVENT INCONTINENCE.**

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Stroke-related incontinence management has not been easily defined for nurses in the rehabilitation setting. The need for skilled continence care is critical in the rehabilitation environment. Furthermore, a patient's toileting and continence needs become pivotal to predicting independence and their at-home burden of care.

An evidence-based, nurse-driven bladder protocol which partners with the patient/family in an acute in-patient rehabilitation program was implemented to improve nursing performance in continence care. Implementation of the protocol was applied to stroke patients. Goals were to establish a bladder management protocol with a structured care plan, flow chart for clinical decision making and a written policy. Associated patient goals included overall management of urinary incontinence, gains in bladder functional independence measures (FIM scores), and continence by discharge.

The bladder protocol included a comprehensive assessment of the patient's premorbid bladder function, urinalysis screening, and use of a 72 hour bladder management record to evaluate urinary patterns. Bladder function was assessed by checking the first three post-void residuals with a bladder scanner device (within 15 minutes of each void). If any urinary incontinence or retention were recorded, the bladder management record was maintained for the duration of the rehabilitation stay. Further specific continence goals were established for patients during weekly rehab team meetings.

Data collection showed 11 of 16 patients who received the bladder management protocol experienced FIM score gains and were continent by the date of their discharge. The remaining 4 patients who remained incontinent were discharged from rehab to a facility which provided a lower level of care. Further study is recommended to evaluate the impact of bladder protocol on other additional diagnosis common to the rehab environment. Additional research is needed to evaluate continence during the transition period home.

Key words: "urinary incontinence", "bladder training program", "bladder management"