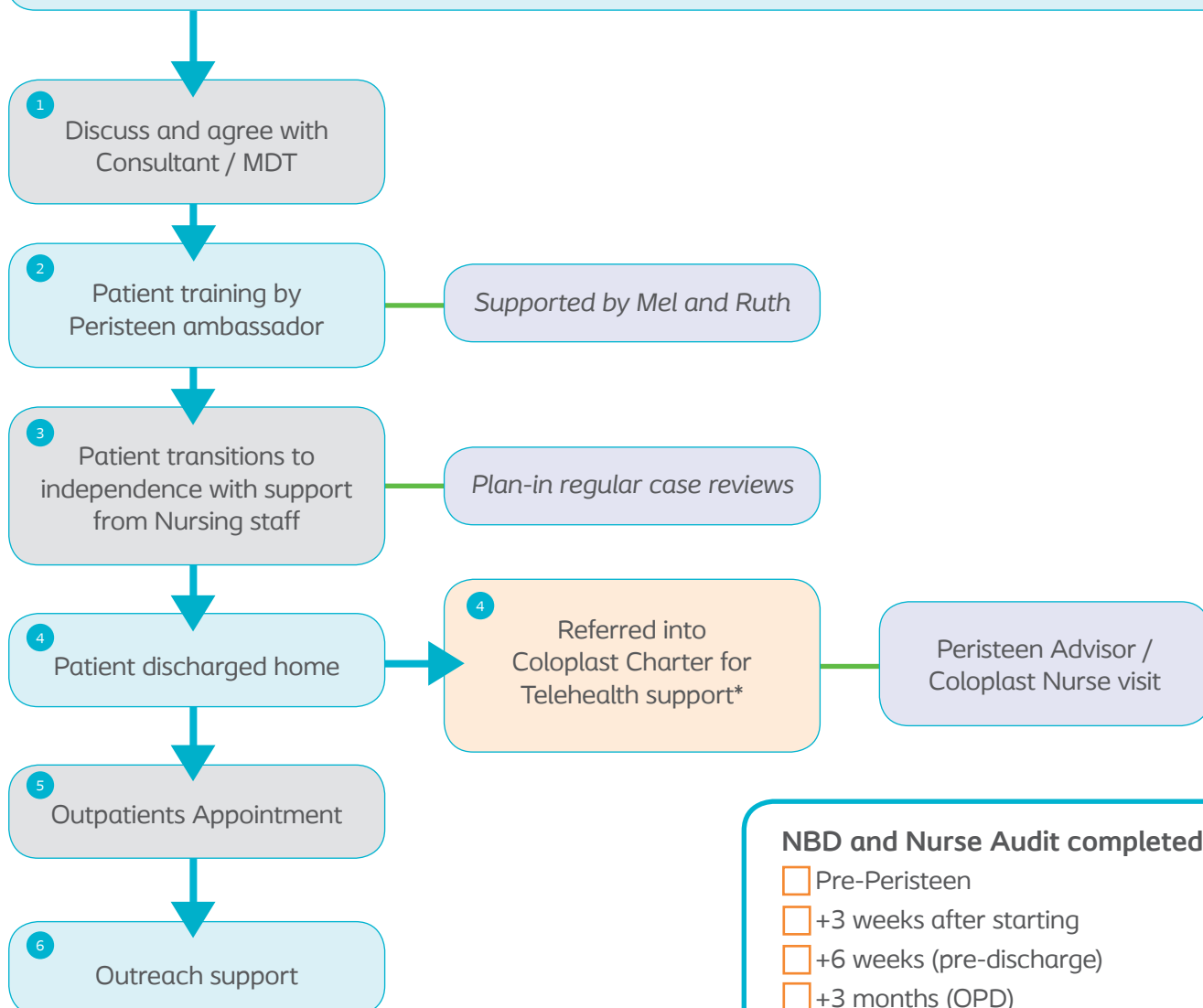


Peristeen® Patient Pathway

Patient meets inclusion for criteria for Peristeen®:

- Sitting up for +4 hours
- Requires regular manual evacuation as method for bowel management (diet / laxative management)
- Able to independently manage Peristeen (physically and psychologically)
- Or; suitable care provider available after discharge
- Individual risk assessment for Autonomic Dysreflexia
- Patient commits to TAI as a bowel management option
- No known Red Flags



NBD and Nurse Audit completed:

- Pre-Peristeen
- +3 weeks after starting
- +6 weeks (pre-discharge)
- +3 months (OPD)
- +6 months (Community Outreach)

*Telehealth link and update sales assessment

Peristeen Patient Pathway

This Peristeen Pathway is written with an open framework, encouraging Transanal Irrigation (TAI) to be offered to patients who are both managing successfully with a conservative bowel management approach, and those who are struggling. The objective of this audit is to understand the impact of early introduction of Peristeen to the patient bowel management experience and the impact on nursing staff.

Inclusion criteria

The intent of this study is to offer Peristeen as a bowel management method early within the patient pathway.

- **Sitting up for 4 hours**
This key milestone ensures patients are physically stable to begin to learn a new approach and to sit on the toilet
- **Requires manual evacuation**
Either independently or through nursing intervention. The purpose of the audit will be to determine if Peristeen is a preferred patient choice to this method
- **Able to independently manage Peristeen physically**
Patient has the appropriate dexterity and strength to perform the procedure
- **Able to independently manage Peristeen psychologically**
Patient understands the importance and value of committing to a regular alternate day regime
- **Or; if unable physically to perform Peristeen**
Patient has access to carer who can provide the care on discharge
- **Patients with a high AD response during current bowel management**
Discuss as part of the MDT prior to considering Peristeen as an option
- **Patient consents to start Peristeen**

Pathway notes

- 1 All patients who are under consideration should be agreed by the MDT
- 2 Patient engagement is critical - a specific time should be allocated to discuss Peristeen using appropriate materials. Complete initial patient assessment (NBD)
- 3 Ongoing training and support by ward staff that should move towards independent use of Peristeen. Liaise with OT/Physio as and where needed. Repeat NBD at +3 weeks
- 4 On discharge - register with Coloplast Charter for telehealth support. Provide GP with info on prescribing Peristeen and rationale. NBD at discharge. Liaise with Community staff involved prior to discharge

Coloplast Charter support patient and will refer back to Unit if they identify critical issues with routine
- 5 OPD +3 months - include Bowel Management as part of OPD review. Complete NBD
- 6 Outreach support (+6 months) - include Bowel Management as part of outreach review. Complete final NBD