

**IREDELL HEALTH SYSTEM**

<b>Retention Enemas: Kayexalate Enema Milk and Molasses Enema</b>	
Approved by: B. Quate, VPN P. Williams, RN, Director 3N	Last Revised/Reviewed Date: 12/2020
Nurse Management Team P&T Committee	Date: 11/2017 Date: 02/2021

**Purpose:** Safe administration of a therapeutic retention enema.

**Personnel:** RN, LPN

**Standard Equipment Needed:**

1. Non-sterile gloves
2. Face shield
3. Gown and boot covers
4. Bedpan
5. Bath blanket
6. Bed protector

**Additional equipment needed depending upon type of enema:**

<b>Kayexalate Enema</b>	<ul style="list-style-type: none"> <li>• Cleansing enema administration set</li> <li>• Kayexalate suspension (as ordered by provider)</li> <li>• Adhesive tape</li> <li>• Soft French (28) Foley Catheter (30 cc balloon)</li> <li>• Y- connecting tube, tubing, and clamp</li> </ul>
<b>Milk and Molasses Enema</b>	<ul style="list-style-type: none"> <li>• 1 cup milk</li> <li>• 1 cup molasses (obtained from dietary)</li> <li>• Enema administration set</li> </ul>

**Procedure: Kayexalate Enema (for treatment of hyperkalemia)**

1. Provide patient privacy
2. Thoroughly explain procedure to the patient, especially how long the enema solution is to be retained in accordance with provider’s directions.
3. Apply gloves, face shield, gown and boot covers.
4. Drape patient with bath blanket, folding top covers to foot of bed. Place bed protector.
5. Place patient in left Sims lateral position and administer cleansing enema.
6. After patient has expelled enema, lubricate foley catheter tip and insert approximately 20 cm (approximately 9”).
7. Shake bottle well, remove bottle closure and screw on the enema tip with safety shield intact. Remove safety shield from enema bottle and insert it into outer opening of the foley catheter.
8. Kayexalate suspension is introduced into the body at room temperature by raising the bottle above the level of the hips, allowing the suspension to flow by gravity.
9. The suspension is flushed with 50 – 100 mL of tap water. Clamp the tube, remove the bottle with the enema tip from catheter tip, inflate balloon with 30 cc air, and leave balloon against

anus to prevent back leakage. (Patient's hips may be elevated on pillows or patient may be placed in knee-chest position for a short time, if back leakage does occur).

10. Retain suspension in colon 4 hours.
11. After 4 hours, deflate balloon, attach cleansing enema equipment and drainage tubing to Y-connector and then connect the Y to the Foley catheter.
12. Place bedpan in a position lower than the patient's bed with drainage tubing in bedpan.
13. Irrigate colon with 1000-2000 cc tap water, at body temperature, allowing constant drainage.
14. Following irrigation, remove Foley catheter and leave patient clean and dry.

**Procedure: Milk and Molasses Enema**

1. Obtain milk and molasses from dietary and mix. (In order to get the milk and molasses to mix, it may be necessary to warm both containers in a bowl of warm water.)
2. Open enema administration set and pour milk and molasses solution into enema bag.
3. Administer enema following procedure for cleansing or saline enema.
4. Encourage patient to retain solution as long as possible before expelling.

**Documentation:**

Chart patient's response to education, tolerance of procedure, the type and amount of retention enema solution given, time, length of time patient retained solution, results and any abnormal findings, such as blood in stool, etc.

INITIAL EFFECTIVE DATE: 12/2006

DATES REVISIONS EFFECTIVE: 02/2021

DATES REVIEWED (no changes): 02/2010, 04/2011, 02/2013, 11/2017