INTAKE AND OUTPUT MEASUREMENT

PURPOSE:
To maintain an accurate measurement of the resident's intake and output as ordered by the physician to assess fluid balance.

EQUIPMENT:
1. Intake and output documentation in point of care in PCC.
2. Bedpan, urinal and collection device.
3. Graduated container.

THE FOLLOWING RESIDENTS REQUIRE MEASUREMENT AND GENERAL DOCUMENTATION GUIDELINES OF INTAKE AND OUTPUT EVERY SHIFT, INCLUDING A 24-HOUR TOTAL AND WEEKLY EVALUATION:
1. All residents with indwelling catheter.
2. All residents receiving enteral nutritional therapy. (Intake required.)
3. All residents receiving hypodermoclysis or intravenous feeding/fluids.
4. All residents with specific physician's orders for measurement of intake and output.
5. All residents with an order for fluid restriction. (Intake required.)

NOTE: OUTPUT CANNOT BE MEASURED ACCURATELY ON INCONTINENT RESIDENTS WITHOUT INTERNAL OR EXTERNAL CATHETER.

PROCEDURE:
1. Measure and record all liquids ingested.
2. Estimate and record all ice and food(s) that become liquid at room temperature.
3. Instruct resident to urinate in bedpan, urinal and specimen container in toilet, and notify nurse. Measure urine and record amount on individual record.
4. Empty urinary drainage/bag or leg bag & record output. Notify nurse if reduce output or change in appearance of urine.
5. If any bleeding, emesis, diarrhea or drainage occurs, measure and record as output.
6. When enteral nutritional therapy, hypodermoclysis or intravenous fluid is administered, record amount administered.
7. Intake and output are totaled every twenty-four hours.
8. The intake and output is to be evaluated weekly to determine adequacy. If not adequate or it output is more than intake, the physician is to be notified and corrective action taken.