

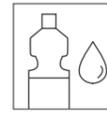
## Preparing the patient



Position the patient **lying down on their left side**, if possible, to insert the drainage system.

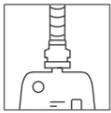


**Palpate the rectal ampulla** to rule out compacted stools. Use a lubricant.



If faeces are present in the rectal ampulla and bowel patterns are unknown, **prepare the patient by giving a rectal enema.** (recommendation: glycerine/water solution)

## Preparing the system



Connect the drainage system to the collection bag provided.



**Completely deflate the drainage system balloon** using the inflation syringe provided.



Coat the front **third of the drainage system with lubricant gel.**

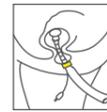
## Inserting the system



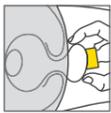
**Hold the top section of the drainage system as illustrated**, and insert it around two-thirds of the way into the anus.



**Inflate the balloon with 85 ml of air.** Use the graduated syringe provided. The balloon will then be a bit underinflated and soft in the rectum. **Do not exceed 85 ml.**



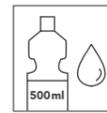
**Check the transanal position of the drainage balloon.** The yellow positioning ring must be visible outside of the anus. With normal anatomy, the lower section of the balloon will protrude from the anus.



Check the degree of inflation of the section of the balloon protruding from the anus. The balloon must look and feel inflated.



**Uncoil the drainage tube.** Ensure that the drainage system outlet is clear and unobstructed. Attach the collection bag low enough below the patient.



Carry out the **first irrigation after approximately 30 minutes.** Foreign body irritation will have abated by this time. Use a irrigation solution at body temperature. (Recommendation: 500 ml of crystalloid solution). Introduce the solution over a period of about 30 minutes.



If the drainage system is expelled reflexively repeatedly, an **optional local anaesthetic gel** can be injected into the rectum.

## Drainage system maintenance

### Once per shift

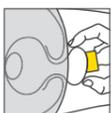


**Check the transanal position**  
The yellow ring must be visible outside of the anus. If it is not visible, the correct position can be restored by gently pulling on the system.



**Check that the drainage system is draining freely**  
Monitor for signs of abdominal congestion and stool retention. Check bowel activity by auscultation.

### Once per day



**Check the inflation status of the balloon**  
The section of the balloon protruding from the anus must be look and feel inflated.

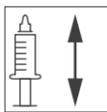


Carry out a **cleansing system flushing or rectal enema** with 250 to 500 ml of irrigation solution at body temperature. (Recommendation: crystalloid solution for infusion)

### Additional information and instructions



**Change the collection bag** every 48 hours. (Recommendation)



**Deflate and inflate the balloon** at 72-hour intervals. Deflate the balloon completely. Re-inflate the balloon with 85 ml of air.



Maximum **duration of use: <30 days.**

## System irrigation



Position the patient **lying down on their left side**, if possible.



Use **liquid at body temperature.** (Recommendation: crystalloid solution for infusion). Cold solutions can trigger rectal contractions that cause the drainage system to be expelled from the rectum.



Connect the irrigation solution **to the irrigation port labelled Irrig.** As another option, a 50-ml syringe with irrigation solution can be connected to the port, and the irrigation solution can be administered with pressure.

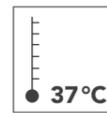
## Irrigation



Position the patient **lying down on their left side**, if possible.



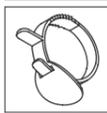
Position the red **clamping strap a hand's width from the patient's anus** and tighten the strap.



Use **liquid at body temperature.** (Recommendation: crystalloid solution for infusion). Cold solutions can trigger rectal contractions that cause the drainage system to be expelled from the rectum.



Connect the **supply line to the irrigation port labelled Irrig.**



To end the irrigation process, loosen the strap and slide it to the collection bag.

## Stool modification (Recommendation)

**hyghtec® basic-plus helps liquefy the stools in a consistent manner, thus optimising its function. All stool modification methods must be prescribed by the treating physician.**

### • Polyethylene glycol (e.g. Macrogol® bag 1-0-1)

The Macrogol powder stays on the medication chart until the system is removed.

### • Sodium picosulfate (e.g. Laxoberal® drops 12-0-0)

Laxoberal is the first substance to be discontinued (generally after 3 – 5 days), as soon as thin, liquid stools are obtained through irrigation. If the effect is intense/in the event of abdominal discomfort, reduce the dose to 8 drops.

### • Sab-Simplex® (10-0-10 ml)

The administration of Sab-Simplex reduces abdominal discomfort and allows the gas to "be released" more easily.

No other medication should be required to change the stool consistency. | In addition to oral medication, carry out rectal irrigation once a day with 250 to 500 ml of crystalloid irrigation solution at body temperature. Patients can follow a regular diet, but coarse fibre-rich foods should be avoided.

## Administration of medications/active substances

**Transanal administration of preparations must always be prescribed by the treating physician.**

The drainage system components exposed to the respective substances are made from polyurethane, polycarbonate, PVC and silicone. Please **discuss the chemical compatibility of the respective substance to be administered** with the treating physician or pharmacist. **Rinse the irrigation tubing labelled as Irrig.** with 50 ml of physiological saline solution before and after administering the substance.

## Sampling



Position the red **clamping strap approximately 5 cm below the sampling port** and tighten the strap there. Insert the hub of the sampling syringe as far as possible into sampling port and collect the stool sample. Transfer the contents of the syringe into a stool sample tube.

## Removing the drainage system



**Completely deflate the drainage balloon** and remove the drainage system from the anus by pulling gently. Dispose of the drainage system in accordance with local hygiene regulations.