Bowel Assessment Chart - Data Standards Specification

User Interface Name	Field Identifier	Definition	Data Display Format	Data Value Format (code or other value)	Value Sets	Business Rules	Additional Information/definitions/formats	Source
Date and Time of Assessment	Assessment_Date_Time	This is the date and time the assessment took place	Date and Time Picker	8 digit numeric, YYYY-MM-DD 4 digit numeric, hh:mm				
Has the patient opened their bowels today?	Bowels_opened	This is to indicate whether the patient has opened their bowels today	Radio Button (No Yes)	n1	1 - No 2 - Yes	Must be asked at least once a day Need an alert if not been asked		
Is this normal for you?	Bowels_normal	This is to indicate whether the patient's bowels opening is normal for them	Radio Button (No Yes)	n1	1 - No 2 - Yes			
Bowel Movement assessed by?	Bowels_assessed	This is to indicate that the patient's bowel movement was assessed	Radio Button (Multiple Options - Single Select)	n1	1 - Nurse 2 - Patient/Others	Question will only appear if field id 'Bowels_Opened' = 1		
Tip: Record stool information if bowel movement abnormal or follow organisational policy								
Please enter details	Bowels_normal_details	This is to provide further details on the patient's bowel habits if different to normal	Text Box	nvarchar(500)		Question will only appear if field id 'bowels_normal' = 2		
Date and time of bowel movement	Date_Time_Bowel_Movement	This is the actual date and time of the patient's last bowel movement	Date and Time Picker	8 digit numeric, YYYY-MM-DD 4 digit numeric, hh:mm				
Using the chart below, below please select the appropriate bowel movement for the patient								
Bristol Stool Chart First published: Lewis S. J., and Heaton, K. W. (1997) 'Stool form scale as a useful guide to intestinal transit time'. Scandinavian Journal of Gastroenterology 32 (9), pp.920–4	BS_Chart	A chart for clinical staff to identify the patient's bowel movement	Radio Button (Multiple Options - Single Select)	n1	1 - Type 1 Separate hard lumps, like nuts (hard to pass) 2 - Type 2 - Sausage shaped but lumpy 3 - Type 3 - Like a sausage but with cracks on the surface 4 - Type 4 - Like a sausage or snake, smooth and soft 5 - Type 5 - Soft blobs with clear cut edges 6 - Type 6 - Fluffy pieces with ragged edges, a mushy stool 7 - Type 7 - Watery, no solid pieces. Entirely liquid	Mandatory Field if field id 'Bowels_assessed' = 1		
Amount of stool movement	Stool_movement_amt	This is to indicate the amount of the patient's stool movement	Radio Button (Multiple Options - Single Select)	n1	1 - Small 2 - Medium 3 - Large	Question will only appear if field id 'bowels_opened' = 1 Mandatory Field if field id 'Bowels_assessed' = 1		
Any Pain and/or Discomfort	Bowel_pain	This is to indicate whether the patient is in any pain / discomfort due to their bowels	Radio Button (No Yes)	n1	1 -No 2 - Yes 3 - Unable to assess	Question will only appear if field id 'bowels_opened' = 1 If field id 'Bowel_pain' = 1 Please follow local policy Mandatory Field if field id 'Bowels_assessed' = 1		
Please enter comments in relation to the description of the bowel movement i.e. blood, mucus or pain details	Bowel_comments	This is to provide further details on the pain and discomfort the patient is in due to their bowels i.e blood, and mucus.	Text Box	nvarchar(500)		Question will only appear if field id 'Bowel_pain' = 1 It is not mandatory It will appear at the end of the assessment		
If sample taken, please enter date and time	StoolSample_date_time	To record the date and time of when the stool sample was taken	Date and Time Picker	8 digit numeric, YYYY-MM-DD 4 digit numeric, hh:mm		Question will only appear if field id 'bowels_opened' = 1		