

Fecal Microbiota Transplant (FMT) Protocol by Enema for Patients with Recurrent *Clostridium difficile* Infection

Equipment needed:

- Stool collection container with lid (e.g., Covidien Dover Commode Specimen Collector, catalog #24005A)
- Funnel-shaped urine strainer
- 1000 mL sterile preservative-free 0.9% Sodium Chloride labeled for irrigation (alternatively, may use 1000 mL bag of normal saline for intravenous use)
- Personal protective equipment: disposable gown, gloves, mask (face shield optional)
- Enema bag system with retention enema tip (e.g., Super XL Enema Bag System from E-Z-EM, Inc. of Westbury, NY; catalog#8925, including balloon inflator; catalog #9529)
- Water-soluble lubricant (e.g., Medichoice Lubricant Jelly)
- Disposable plastic food container with lid, or gallon-sized Ziplock bag
- Plastic forks (2), or tongue depressors (2) or other similar instruments which can be used for manually homogenizing stool

Before the procedure:

- The donor should be provided with a stool collection container with lid. If a formal stool collection container is not available, a disposable plastic food container or other container can be used for convenience.

Procedure:

- Gently pour the saline into the container into which the donor stool was collected. Use the plastic forks (or similar instruments) to manually homogenize the stool. An alternative method is to place the stool into a Ziplock bag, which can then be manipulated to homogenize the stool sample as much as possible.
- Clamp the tubing at the base of the bag; test the integrity of the retention enema bulb by attaching the balloon inflator and inflating the bulb
- Once the stool is mixed with normal saline and satisfactorily homogenized, pour the mixture through the urine strainer into the enema bag.
- Pour the filtered stool solution into the enema bag and screw the cap on.
- Place patient in R lateral decubitus position.
- Lubricate enema tip and insert into the patient.
- Hang the bag containing the donor stool and saline solution above the patient on an IV pole or other device
- Unclip tubing, and allow the gentle infusion of fluid into patient. Infuse as much volume as the patient can handle comfortably; some cramping is to be expected.
- After the infusion is complete, have the patient change positions by roll over on onto his/her back for a few minutes, then to the L lateral decubitus position for a few minutes, then back to the R lateral decubitus position to

finish the procedure (total duration of instillation should be at least 10 minutes).

- Once the procedure is complete, it may be helpful to drop the closed enema bag to the ground, allowing the bulk of the fluid to empty out and reduce the discomfort for the patient.
- Deflate the enema bulb and remove the tip.
- Patient is able to be dismissed when clinically stable.

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