

Children's Mercy Kansas City

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Care Process Models

Quality Improvement and Clinical Safety

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2-2021

### Constipation

Children's Mercy Kansas City

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These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly, these guidelines should guide care with the understanding that departures from them may be required at times.

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Obtaining x-rays is not recommended except with S/S of bowel obstruction

**Constipation Triage Plan for Children ≥ 2 Year Old**

- S/S of Bowel Obstruction:**
- Tense abdominal distention
  - Recurring or bilious emesis
  - Not passing gas

Does the patient have s/s of bowel obstruction?

Consider 2-view imaging (Supine and Upright) and surgical consult

Does patient have a bowel obstruction?

Patient off guideline

Further evaluation needed; patient off guideline

Are there RED FLAGS for underlying disease causing constipation?

Is patient able to tolerate PO?

Has patient undergone Oral Home Cleanout for at least 2 days in the past 3 days?

Can the patient continue oral clean out or Fleet® enema at home?

Can pt be safely discharged?

**If available, consider:**

- Saline OR Fleet enema
- Further imaging

**If not available, consider transfer to higher level of care.**

Has pt. improved after interventions?

Consider admission

Can pt be safely discharged?

**Considerations for admission:**  
Patient could be admitted for bowel cleanout if unable to tolerate PO or needs significant pain control.

Enema Types/Volumes	
Weight	Volume to administer
<b>Saline Enema</b>	
<20 kg	10 mL/kg
≥ 20 kg	10 mL/kg (Max: 500 mL)
<b>Fleet® Enema</b>	
2-4 years	30 ml
5-11 years	60 ml
>12 years	130 ml

Oral Home Cleanout (Minimum of 2 Days)		
Age	PEG 3350	Chocolate Senna (adjunct therapy)
2-4 yrs 10-20	1/2 capful (8.5 grams) 3-4 times/day in 4-6 oz of <b>clear</b> liquid*	0.5 Chewable (7.5 mg) BID**
5-10 yrs 20-40	1 capful (17 grams) 6-8 times/day in 6-8 oz of <b>clear</b> liquid*	1 Chewable (15 mg) BID**
11+ yrs 40 kg	1 capful (17 grams) 8 times/day in 6-8 oz of <b>clear</b> liquid*	2 Chewable (30 mg) BID**

\*Each dose should be consumed within 30 minutes  
\*\*To be given in addition to PEG 3350

**Important NOTE:**  
Child should stay home from school when Oral Home Cleanout is implemented (a school note should be provided to parents)

**Considerations for discharge home:**  
Patient could be discharged to home for 12-24 hour observation to await results if:

1. Patient is tolerating fluids PO and aggressive plan
2. Discomfort is manageable at home
3. Patient lives within 30 minutes of a medical facility

Algorithm revised: 02.23.21  
Owner: A. Daly, MD

Bowel cleanout at home, after education r/t:

- Schedule and rationale
- Consider GI consultation

