Constipation Algorithm Patients > 1 Years Old

Pt. dx with constipation

Complete Pt. history and Physical Exam

Red flags for Potential Referral:
- Poor weight gain
- Bloody Stool
- Lumbosacral tufts or dimples
- Abnormal muscular exam
- History of delayed passage of meconium
- Vomiting

Consult with Pediatric GI or Pediatric Surgeon

Is the Pt. Is Impacted?
<2 stools/week, or palpable mass on rectal or abdominal exam +/- overflow incontinence

Disimpaction at Home
Goal: substantial stool output

ORAL:
- Polyethylene Glycol 3g/kg/day ×2 days
- Senna (Ex-lax chocolate chew) ¼ - 1 square daily × 2 days
  - If insufficient stools after day 1, double second day dosage. See action plan dosage chart for guidance.
- Alternative to Ex-lax: Bisacodyl tab/suppository 0.25mg/kg/day up to 10mg daily × 3 days

PLUS
- Between 2-6 yrs of age: Normal saline or mineral oil enema 60 ml x 1, can repeat if needed.
- >6yrs: Normal saline or mineral oil enema 120 ml x 1, can repeat if needed.
  - (Oral preferred over rectal for patient with functional retention. Rectal tx will aggravate retention behavior.)

OR RECTAL:
- Between 2-6 yrs of age: Normal saline or mineral oil enema 60 ml x 1, can repeat if needed.
- >6yrs: Normal saline or mineral oil enema 120 ml x 1, can repeat if needed.

Was treatment effective

If Yes, yes to symptoms improved.

Follow disimpaction guidance

If No, consult with Pediatric GI or Pediatric Surgeon

Follow disimpaction guidance

Symptoms Improved?
>2 stools/week, comfortable, no soiling

Maintenance Regimen
Goal: >2 stool/week, no pain, no soiling

Diet:
- Normal Fiber intake for age
- Normal hydration for age

Behavioral Tools if Toilet Trained
- Tracking calendar, toileting schedule
- Consider "Poo and You" video

Daily Stool Softener:
*See action plan dosage charts
- Polyethylene Glycol 0.4-1.0 g/kg/day OR
- Lactulose 1-3 ml/kg/day OR
- Magnesium Hydroxide 1-3 ml/kg/dy.

Refer to Ped. GI

Relapse in Therapy: Is pt. compliant?

Follow disimpaction guidance

Has disimpaction been done previously?

Follow disimpaction guidance

Refer to Ped. GI

Constipation Dx:
Pt. experiences 1 month of at least 2 of the following:
- 2 or fewer defecations per week
- History of excessive stool retention
- History of painful or hard bowel movements
- History of large diameter stools
- Presence of a large fecal mass in the rectum

Additional Criteria for Toilet Trained Kids:
- At least 1 episode/week of fecal incontinence after learning toileting skills
- Hx of large diameter stools that can obstruct the toilet

**Avoid weaning during toilet training or stressful transitions. If functional withholding behavior, consider maintenance up until toilet training completed.

Updated: 12/13/19