

First visit for this issue? ☐ Y ☐ N
 Copy of action plan given to patient? ☐ Y ☐ N

For follow up visit, have symptoms improved? ☐ Y ☐ N
 Adherence? ☐ Satisfactory ☐ Needs Improvement

Constipation Action Plan

Patient Name: _____ DOB: _____ Appt. Date: _____ Provider: _____ Weight: _____

Current symptoms: stools are: ☐ hard ☐ large ☐ painful Withholding Stool/Soiling ☐ YES ☐ NO Stool frequency ☐ ≤ 2 stools/wk
 Impacted? (≤ 1 stool/wk OR palpable stool on abdominal or rectal exam) ☐ YES ☐ NO

What's going on?

Green Zone - Maintain "Doing great"

- Passing 1-2 soft, comfortable bowel movements per day

Continue medications for at least 2 months

Yellow Zone- Rescue "Getting backed up"

- No stool in 1-2 days
- Stools are hard or hurt to pass
- Mild to moderate abdominal pain

Red Zone- Cleanout "Fully backed up, impacted"

- No stool in 4 days
 - Yellow zone for 2-3 days without relief
 - Worse abdominal pain
 - Stool accidents
- CALL OFFICE if vomiting, severe pain, fever, bloody stool or if considering going to the Emergency Room

Medications

- ☐ PEG 3350 (Miralax*): see chart

Behavioral interventions

- ☐ Sit on the toilet 2-3 times/day
- ☐ Track stools on calendar
- ☐ Sticker chart or prizes for taking medication and stooling in the toilet

Diet

- ☐ Eat ___ g of fiber per day (daily intake: age + 5-10g/day)
- ☐ Drink plenty of water

Increase daily softening medication until back in Green Zone

- ☐ Increase PEG 3350 to ___ capfuls ___ times per day

Start stimulant medication "Helps the bowels push" until back in Green Zone

- ☐ Take senna (ex-lax*) ___ chocolate square or ___ ml one time per day

Rescue dose: give half the weight-based dose listed in the 3-day oral disimpaction table below



- ☐ Do a PEG 3350 + senna cleanout (at home, on weekend, expect a lot of stool)

If need immediate relief:

- ☐ Give saline/Fleet* enema ONE TIME
 - ✓ Only for age 2 years and up
 - ✓ Do not repeat unless MD advises
- ☐ Give glycerin (suppository OR enema) once a day for 1-3 days

Management

Child's weight	PEG 3350 Daily dose (mix in clear liquid)	Adjust dose every 3 days to achieve goal by
☐ < 10 kg (6+ months)	1/2 to 1 teaspoon in 4 oz. (clear liquid or a bottle)	1/4 to 1/2 teaspoons
☐ 10-20 kg	1 to 2 teaspoons in 4 oz.	1 teaspoon
☐ 21-30 kg	2 teaspoons in 4 oz.	1 teaspoon
☐ 31-40 kg	1 capful in 8 oz.	1/2 capful
☐ 40+ kg	1 to 2 capfuls in 8 oz.	1 capful

3-DAY ORAL DISIMPACTATION (CLEANOUT)		
Weight	PEG 3350 (e.g. Miralax)	Senna 8.8 mg/5ml syrup OR 15 mg/choc. square
☐ < 10 kg	Use glycerin enema or suppository	
☐ 10-20 kg	0.5 capful in 4oz 2x/day	5 ml syrup daily
☐ 21-30 kg	1.5 capful in 8oz 2x/day	1 square daily
☐ 31-40 kg	2 capfuls in 8oz 2x/day	1 square daily
☐ 40+ kg	2 capfuls in 8oz 3x/day	2 squares daily

Follow-up by phone within 7 to 10 days. Date: _____
 Follow-up in office within 4 weeks Date: _____
 Initials: Provider _____ Caregiver _____
 RTGI ☐ YES ☐ NO Date: _____

*Generic products are fine to substitute for common brands listed