






# My Constipation Evacuation Plan

Patient Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_ Discharge Weight(kg): \_\_\_\_\_  
 Outpatient Pediatrician: \_\_\_\_\_ Specialist: \_\_\_\_\_

Age 6-11 years (~20-40 kg)	Treatment
After Discharge/Disimpaction	<input type="checkbox"/> Miralax 1 cap (17 g) <b>twice a day</b> in 8 oz fluids for 3-6 days <input type="checkbox"/> Review "The Poo in You" Educational Video and GIKids Resources
<b>Good/Maintenance</b>  <ul style="list-style-type: none"> <li>● eating well</li> <li>● normal play</li> <li>● no belly pain</li> <li>● 1 soft poop/day</li> <li>● clean underwear</li> </ul>	<input type="checkbox"/> Miralax 1 cap (17 g) <b>once a day</b> for 1 -2 months. <input type="checkbox"/> Lactulose 30 - 60 mL (20 - 40 g) <b>once a day</b> for 1-2 months <input type="checkbox"/> Schedule toilet time <b>3 times or more per day</b> <input type="checkbox"/> Fiber: at least 11-21 g <b>once a day</b> (diet, gummy, Benefiber, Metamucil) <input type="checkbox"/> Drink 7 - 11 cups (56 - 88 oz) of water <b>every day</b>
<b>Bad</b>  <ul style="list-style-type: none"> <li>● eating less</li> <li>● playing less</li> <li>● some belly pain</li> <li>● no poop in 3 days</li> <li>● poop streaks</li> </ul> <p>If no poop in 24-48 hours, move to the "Worse" section.</p> 	<input type="checkbox"/> Miralax 1 cap (17 g) <b>twice a day</b> for no more than 2 weeks. <input type="checkbox"/> Lactulose 45 mL (30 g) <b>twice a day</b> for no more than 2 weeks. <input type="checkbox"/> Magnesium hydroxide (Milk of Magnesia) 15 - 30 mL (1.2 - 2.4 g) <b>once a day</b> OR Magnesium citrate (1 gummy) <b>once before bed</b> for no more than 2 weeks. <input type="checkbox"/> Senna 8.6 mg (1 tablet) = 5 - 7.5 mL (8.8 - 13.2 mg liquid) <b>once a day</b> for no more than 2 weeks. <input type="checkbox"/> Bisacodyl 7.5 mg (1 - 2 tablet(s)) <b>once a day</b> for no more than 2 weeks.
<b>Worse</b>  <ul style="list-style-type: none"> <li>● not eating</li> <li>● not playing</li> <li>● more belly pain</li> <li>● bigger belly</li> <li>● bloating</li> <li>● pooping hurts</li> <li>● poop accidents</li> </ul>	<input type="checkbox"/> Contact Provider/Specialist: Name: _____ Number: (____) ____ - ____ <input type="checkbox"/> Suppository/Enema: _____ <input type="checkbox"/> Start "Clean Out" with bland or clear fluid diet
<b>Clean Out</b>  <ul style="list-style-type: none"> <li>● continue until stools clear/yellow</li> <li>● notify provider if abdominal pain</li> </ul>	<input type="checkbox"/> Miralax 4 g/kg/day = ____ <b>cap(s)/day for 1 day</b> , each in 8 oz of fluids <input type="checkbox"/> Miralax 2 g/kg/day = ____ <b>cap(s)/day for 2 days</b> , each in 8 oz of fluids <input type="checkbox"/> Bisacodyl 5 mg (1 tablet) <b>once</b> before Miralax <input type="checkbox"/> Other: _____

Parent: \_\_\_\_\_ Provider: \_\_\_\_\_ RN Initial: \_\_\_\_\_