Constipation Treatment Protocol



1. Assess potential causes & adjust as able

Potential Cause	Recommendation	
Inadequate fluid intake	Goal: ~8 glasses/day (64 oz) Sources: water, juice, soup, decaf tea/coffee	
Inadequate fiber intake	Goal: 25 g/day Sources: fruits, vegetables, whole grains, nuts, seeds, beans, flax, bran "P" word food laxatives: prunes/juice, pears, peaches, plums, papayas Supplements per package instructions: Benefiber, Metamucil, Optifiber, Citrucel Fruit lax recipe in patient handout	
Constipating medications	Iron supplements: switch to slow release (e.g. "Slow Fe" brand) Opioids: add bowel regimen Sialorrhea meds: add bowel regimen	
Lack of exercise	Increase activity (as able and per healthcare team guidance)	
Positioning	Consider using a "squatty potty" if appropriate with positioning ability	
Need for probiotics* (for irregularity or intermittent constipation)	Sources (to be taken daily): yogurt, kefir, pickles, kimchi, sauerkraut, kombucha supplements (Culturelle, Florastor, Align)	

^{*}Trial for 2 weeks; if no significant benefit, start bowel regimen

2. Start laxative regimen

Instructions: Continue to advance steps until patient has a BM that is soft and comfortable to pass at least every 2-3 days. Once at this point, continue at current step.

Day	Step	# of Laxatives per Timing	Timing
Days 1 &2	1	2 Senna (8.6 mg each)	Bedtime
Day 3	2	2 Senna (8.6 mg each)	Breakfast & Bedtime
Days 4 & 5	3	2 Senna (8.6 mg each)	Breakfast & Bedtime
		1 PEG3350 (17 g = 1 packet or capful)	Bedtime
Days 6 & 7	4	2 Senna (8.6 mg each)	Breakfast & Bedtime
		1 PEG3350 (17 g = 1 packet or capful)	Bedtime
		1 Bisacodyl suppository (10 mg)	Bedtime
Day 8	5	Stop other bowel meds and consider MgCitrate* (10 oz) or Lactulose (15 mL) + 8 oz water	Morning

If patient is still constipated after Day 8 or exhibits severe abdominal pain, severe abdominal distention or vomiting, recommend ER visit

^{*}MgCitrate not recommended for patients with kidney disease