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Constipation Management Sheet for Infants and Small Children

Name:	Date Next Appointment
CIRCL	E DO ONLY THE CHECKED AND CIRCLED ITEMS. IF AN ITEM IS LEFT BLANK OR NOT ED, DO NOT FOLLOW THAT SECTION. THE GOAL:BM's, □soft □ normal per day orper week
	Prune, Peach, Mango or Pear Juice:oz
	Pediatric Fleet phospho-soda (Saline) enema. Give enema per day for days Best to give when at least 1 parent and 1 other adult available; one to give the enema and 1 to hold the child during insertion. Follow the instructions for insertion on the package. Hold the cheeks of the buttock together for at least 5minutes to prevent the enema from being immediately expelled.
	Glycerin or BabyLax Liquid Glycerin suppository: Give suppository per day for days. Best to give when at least 1 parent and 1 other adult available; 1 to give the suppository and 1 to hold the child during insertion. □ May increase by 50% 100% only as needed.
	Little Tummys Laxative: Give ml time(s) per day. This comes as a chocolate thick liquid. Measure as best you can. Best given at bedtime. □ May increase or decrease by 50% 100% only as needed.
	ExLax: Give little rectangletime(s) per day. This comes as a chocolate flavored rectangle candy. Best given at bedtime. Keep out of child's reach when not in use. □ May increase or decrease by 50% 100% only as needed.
	Miralax or Glycolax (generic Miralax):capful in oz of liquid, times per day May increase or decrease by 50% 100% only as needed.
	Calmol 4 Suppositories for \square anal fissures or \square to affect a gentle anal dilation: Use suppository: \square At bedtime \square 2 times per day The suppositories should be rolled in the hand (cut them first if necessary) until slightly warmed and lubricated, and then inserted. These suppositories do not have laxatives, just emollients. However, your child may have a BM afterwards from local stimulation of the anus.
	Have your child sit on the toilet for 5-10 minutes 3 x per day; the best time is after meals. The feet should reach the ground and the buttocks should be supported by the toilet seat, and not by the child's hand holding on to the edges of a seat that is too large for their rear.