



Interior Health

BOWEL CONTROL GUIDE

Site: _____

Always initiate simultaneously with any narcotic order

Level 1	Mild constipation due to diet changes, reduced intake, inactivity	<p>If Possible: Increase fluid intake Increase fibre in diet Increase activity</p> <p>Meds Colace 100 mg bid Glyseennid 12 mg bid Magnolax 15-30 mLs daily prn</p>	<p>fruit bar</p> <p>Alternate fibre tab</p>
Level 2	Mild/moderate constipation OR prevention of constipation when initiating narcotics	<p>Meds Colace 200 mg bid Glyseennid 12-24 mg bid</p>	Diet – Fluid as above
Level 3A	No BM x 3 days No stool in rectum	<p>Meds Colace 200 mg bid-tid Glyseennid 24-36 mg bid-tid Lactulose 15 mLs daily</p>	
Level 3B	No BM x 3 or more days Stool present in rectum	<p>Meds Use Level 3 meds</p> <p>Supp Glycerine or Dulcolax</p> <p>Enema Use Fleet or Saline enema if supp is ineffective</p>	
Level 4	No BM x 3 or more days Constipated stool impacted in rectum	<p>Meds As above plus supp</p> <p>Enema H₂O₂ (1 part H₂O₂: 3 parts H₂O) OR Mayo enema Disimpaction if indicated (use Oil Retention enema before &/or after disimpaction)</p>	
Level 5	Severe Chronic Constipation caused by complete immobility or absence of sensation		<p>Routine bowel disimpaction as required Use of Colace optional (<i>may cause stool to be too soft to remove easily</i>) OR Regular use of Duloclox supp q 2-3 days OR Regular use of enemas q 2-3 days</p>

Avoid fibre tabs, bran or other bulk laxatives if fluid intake is poor

Date: _____

Physician Signature: _____