

Meet Our Surgical Team



Randall Holland, MD
Medical Director



Elizabeth Pohlson, MD



Mauricio (Tony) Escobar, Jr., MD
Clinical Service Chief of Trauma



Stephanie Acierno, MD, MPH



Abbey Schneidmiller, ARNP



Maria Pecchia, ARNP



Mao-Tang Han, PA



A Mary Bridge surgeon is available for consults 24 hours a day. Please contact our Surgery Clinic at 253.403.4613 or 800.552.1419 ext. 4613.

MEDICATIONS

Do not use laxatives, enemas or suppositories unless recommended by your surgeon or primary care physician.

Your child's bowel management program:

Miralax: _____

Senna: _____

Suppository: _____

An enema program may be required for some children. Normal saline is made by mixing 1.5 teaspoons of table salt with 1000 ml of warm tap water. Measuring spoons like those used for baking are needed. We will give you a measured bottle as well as any additional supplies and instructions needed.

Enema program: _____

Return appointment: _____

Additional information is available at www.digestive.niddk.nih.gov.

Mary Bridge Children's Hospital & Health Center

HOSPITAL

317 Martin Luther King, Jr. Way
Tacoma, WA 98405
253.403.1400

HEALTH CENTER

311 South L Street
3rd Floor, West Wing
Tacoma, WA 98405
253.403.4613 or 800.552.1419 ext. 4613
Fax: 253.403.1641

REGIONAL MARY BRIDGE PEDIATRICS

253.403.4613 or 800.552.1419 ext.4613
Fax: 253.403.1641

Olympia

3504 12th Ave. NE
Olympia, WA 98506

Puyallup

1803 South Meridian, Suite B
Puyallup, WA 98371

Silverdale

1780 NW Myhre Road, Suite G220
Silverdale, WA 98383

Allenmore Hospital
Good Samaritan Hospital
Mary Bridge Children's Hospital & Health Center
Tacoma General Hospital
MultiCare Clinics

MultiCare 
BetterConnected

multicare.org

Pediatric Surgery: Constipation



multicare.org

MultiCare 
**Mary Bridge Children's Hospital
& Health Center**
BetterConnected

Dealing with Constipation

It is normal for an older child to have a bowel movement, or pass stool, every one to two days. An infant on breast milk may have bowel movements ranging from one to six times in a day to once per week.

Constipation occurs when stools, or bowel movements, become hard and are difficult to pass, making it hard for your child to “go.”

Constipation is a frequent problem in children, but does not usually require surgery. Constipation can be a symptom of a more serious problem, such as Hirschsprung's disease or abnormalities in the form or function of the anus (opening for the stool), but these problems are not common.

Signs and symptoms of constipation include:

- Lumpy, dry, pellet-like stool
- Pushing hard or straining to pass stool
- Nausea or bloating
- Stomach pain
- Pain when trying to “go”
- “Stool avoidance,” where your child will avoid trying to have a bowel movement (this may be from pain)

With severe constipation your child may also experience the following symptoms:

- Liquid or loose stool which leaks around a hard ball of stool
- Bright red blood in the toilet or diaper from a tear in the skin or lining of the anus, called an anal fissure
- Urinary tract infections

Constipation most frequently develops when:

- Your child's diet is changed to baby food or table food in the first year of life
- There is not enough liquid or fiber in your child's diet
- Your child eats foods that are constipating such as cheese, white bread or white rice
- Potty training is begun
- Regular bowel habits with time to go to the bathroom after eating does not occur
- An older child does not get enough exercise
- Your child waits too long to have a bowel movement

DIAGNOSIS

At the time of your child's visit a history and examination will be done, which may include a rectal examination (examining the anus and rectum, the section of the large intestine that connects to the anus). X-rays may also be needed.

After the initial examination, additional tests may be needed to see if your child has a surgical problem that is causing the constipation. The following tests may be requested or performed by your surgeon and explained during your child's consultation in our office:

- Rectal biopsy
- Magnetic resonance of the anus
- Anal manometry

TREATMENT

Therapy is aimed at establishing a regular pattern of going to the bathroom with soft, sausage shaped bowel movements, and may include the following:

LIQUIDS

- Be sure your child is drinking enough water (this should be measured):
 - Young child (10-35 pounds) 4 - 6 cups each day
 - Older child (over 35 pounds) 6 - 8 cups each day
 - Adolescents and adults 8 -10 cups each day
- Fruit juices such as apple, pear, or prune may be given in children older than 6 months
- Prune juice should be given in smaller amounts than apple or pear juice:
 - Less than 6 months may receive 7 ml (1/2 tablespoon) – 30 ml (two tablespoons) daily
 - Between 6 and 9 months may receive 22ml (1 1/2 tablespoon) – 45 ml (three tablespoons) daily

DIET

Fiber in the diet should be increased gradually after your child is drinking enough liquids.

- Two servings of fruit and three of vegetables high in fiber should be eaten daily, such as berries, pears, peaches, green beans, cauliflower and dried beans such as lentils.
- Whole grain breads, cereals and brown rice are also helpful to form soft bowel movements.
- Constipating foods to be avoided include those high in fat or sugar, white flour, white rice, cheese and bananas.
- Children will sometimes not eat whole wheat bread, brown rice or other foods high in fiber. Whole wheat flour and white flour may be used in equal parts when baking. Brown rice may be used to substitute a portion of white rice when cooking. Also, one tablespoon of unprocessed bran may be added to cereals or casseroles.

TOILETING

Establish a daily routine for going to the bathroom and remind your child to come in from play if there is an urge to have a bowel movement. If your child's feet do not reach the floor a small stool is helpful to bring the knees higher to than the hips. This relaxes the muscles and makes it easier to move their bowels.



Families can call **Child Life Services** at **253.403.5315** to schedule a pre-surgery tour.

Visit our surgical services section of the Mary Bridge website for more helpful information.