

**CASE 5.1**  
**Constipation | Level 1**

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**LEARNING OBJECTIVES**

1. Identify the presenting signs and symptoms of constipation in children.
2. Determine when constipation in children is treatable with over-the-counter (OTC) medications.
3. Recommend OTC nonpharmacologic and pharmacologic treatment options for constipation.
4. Identify appropriate patient counseling points.
5. Detect a medication-related problem requiring intervention.

**CHIEF COMPLAINT:** Constipation for the past week with belly pain being reported over the past 2 days

**HISTORY OF PRESENT ILLNESS:** A mother presents to the clinic located near your community pharmacy with her 3-year-old son. The mother describes her son as having difficulty “pooping” for the past week. Normally he has at least one bowel movement daily, but he has only had two small bowel movements over the past week. He has also been more fidgety and standing on his tiptoes a lot for the past 3 to 4 days. He was potty trained over the past 6 months (finishing 2 months ago) and started pre-kindergarten last month. Per his mother, he had a “stomach bug” a few weeks ago that caused significant diarrhea. During his illness, he had an “accident” where he did not get to the bathroom in time and was sent home from school. After a brief visit at an urgent care clinic and spending a few days at home, he improved and returned to pre-kindergarten last week. The mother has talked with her son about his bowel movements; originally the child stated he did not have to “poop” and now he states he can’t. The nurse from the clinic called the pharmacy and said she was sending the mother and son to the pharmacy to discuss OTC treatment options for the patient’s constipation.

**REVIEW OF SYSTEMS:** Positive for gastrointestinal pain and decreased stool production

**BIRTH HISTORY:** Previously born at full term, vaginal delivery; mother was G1P1 at the time

**PAST MEDICAL HISTORY:** Mild, well controlled asthma (mother reports worse in fall and spring), one hospitalization for anaphylaxis associated with a bee sting last year

**PAST SURGICAL HISTORY:** None

**DEVELOPMENT HISTORY:** Reaching appropriate milestones

**SOCIAL HISTORY:** Recently began pre-kindergarten

**FAMILY HISTORY:** Lives at home with parents, older sister (7), and younger brother (1)

**DIET:** Very picky eater, has trouble eating fruits, vegetables, and cereal

## MEDICATION HISTORY

Medication	Sig	Start Date	End Date	Taking	Authorizing Provider
Ibuprofen 100 mg/5 mL suspension	7.5 mL po 4 times daily	Yesterday		Yes	OTC per mother
Albuterol 90 mcg MDI	Inhaled 4 times daily as needed for wheezing	6 mo prior	Has not refilled	Approximately once a month	Dr. Magaski
Epinephrine 0.3 mg/0.3 mL autoinjector	0.3 mL IM as needed for bee stings	1 yr prior	Has not refilled	Has not used	Dr. Magaski
Multivitamin	1 gummy po daily	02/2013		Yes	OTC per mother

IM = intramuscularly; MDI = metered dose inhaler; OTC = over the counter.

### IMMUNIZATIONS:

HepB: Birth, 2, and 6 months

Rotavirus: 2, 4, and 6 months

DTaP: 2, 4, 6, and 15 months

Hib: 2, 4, and 6 months

IPV: 2, 4, and 6 months

PCV13: 2, 4, 6, and 15 months

MMR and varicella: 15 months

HepA: 15 and 24 months

Inactivated influenza: Received vaccine for this season

**ALLERGIES:** Bee stings (anaphylactic)

### PHYSICAL EXAM (from clinic)

BP 100/60 mm Hg | Pulse 85 beats per min  
Temp 98.3°F (oral) | RR 24 breaths per min  
Wt 15.5 kg | Ht 98 cm | SpO<sub>2</sub> 99%

**GENERAL APPEARANCE:** In mild-to-moderate pain (6/10 on visual analogue scale)

**EYES:** PERRLA, EOMs intact, conjunctiva clear

**EARS:** TM clear bilaterally

**THROAT:** Moist MM, no redness or swelling in throat

**NECK:** No lymphadenopathy

**LUNGS:** No crackles or wheezing

**HEART:** RRR, no gallops or murmurs

**ABDOMEN:** Tender to palpation, mild distension, no mass palpated

**MUSCULOSKELETAL:** Well perfused, no edema, no deformations

**SKIN:** No rashes present

**NEUROLOGICAL:** Alert and oriented

**DRE:** No masses or fecal impaction noted

### LABORATORY DATA

None

### DIAGNOSTIC TESTS

Stool culture (previous clinic visit): no growth, occult blood (-)

### PROBLEM LIST

- Constipation
- Asthma
- Anaphylactic allergy