1.0 Introduction

Target Population:

- Children aged 4 - 18 years old who have been diagnosed with severe fecal disorders (functional constipation, Hirschsprung’s disease, anorectal malformation, spinal abnormalities); and
- Been referred by their primary physician for cecostomy tube (C-tube) insertion.
- **Exclusions**: patients are to be removed from this pathway if there are significant postoperative complications (eg. peritonitis) or a change in diagnosis.

Target Users:

- Surgeons, residents, fellows, nurse practitioners, and nurses.

2.0 Clinical Recommendations

This pathway is a general guideline and does not represent a professional care standard governing providers’ obligations to patients. Care is revised to meet individual patient needs. **Level C: Expert Opinion**
### Cecostomy Tube Insertion Care Pathway

**Expected Date of Discharge:** 3 Days

#### Table: Pre-Operative (in Gt. Clinic)
- **GOALS:**
  1. Patient prepared for IGT
  2. Activity as tolerated

#### Table: Immediately Post-Operatively
- **GOALS:**
  1. Activity tolerated
  2. Adequate pain control

#### Table: Post-Operative Day 1
- **GOALS:**
  1. Activity tolerated

#### Table: Discharge: Day 2
- **GOALS:**
  1. Activity tolerated

### General Care

- **IV FLUIDS:**
  - Administer saline and electrolyte replacement solution and their MFD.

- **MEDICATIONS:**
  - Morphine sulfate PRN
  - Ketorolac or ibuprofen as needed for pain management

### Diet

- **DAYS 1 & 2:**
  - Eat soft diet
  - Constipation may be present

### Post-Operative Care

- **VITAL SIGNS:**
  - Monitor q4h

- **PAIN MANAGEMENT:**
  - Morphine PRN
  - Ketorolac or ibuprofen as needed for pain management

### Blood Preparation

- **BLOOD:**
  - 48 hours prior to surgery

### Discharge Instructions

- **Dressing change:**
  - Change site after discharge; follow-up appointment

### Pediatric Cecostomy Tube Insertion

- **Post-Operative Care:**
  - Monitor q4h
  - Pain management

### Pediatric Cecostomy Tube Insertion

- **Follow-up:**
  - Refer to Pediatric Cecostomy Tube Insertion Guidelines

### Cecostomy Tube Insertion Care Pathway

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3.0 Implementation & Evaluation Plan

3.1 Implementation Plan

- Education and awareness building by General Surgery Program (Surgeons, NPs, fellows, nurse educator) at: fellow orientation (once per year) nursing orientation (every 3 months), and residents orientation (every month).
- Surgeons to communicate any updates in practice to Division of General Surgery and Radiology.
- Radiologists to communicate any updates in practice to Division of General Surgery and Radiology.

3.2 Evaluation Plan

- Length of stay (LOS) evaluation

4.0 References

https://map.ca/bpg/guidelines/assessment-and-management-pain
https://www.pedsurglibrary.com/apsa/view/Pediatric-Surgery-Nat/829027/all/Surgical_Infection?q=SSI

5.0 Guideline Group and Reviewers

Guideline Group Membership

1. Monping Chiang RN(EC), MN, NP - General Surgery
2. Anna Polanski RN(EC), MN NP – General Surgery
3. Dalia Bozic, RN(EC), MN, NP – Interventional Radiology

Internal Reviewers

1. Joao Amaral, MD – Interventional Radiology
2. Agostino Pierro, MD - General Surgery

Related Documents:

- Pain Assessment Guidelines
- Pain Management Guidelines
- Fluid and Electrolyte Management
- Pre-operative Bathing

Attachments:

cecostomy_v1.pdf