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, fellow 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

PRE-OPERATIVE IN GT CLINIC
1. Patient prepared for GT
2. Activity as tolerated

IMMEDIATELY POST-OPERATIVELY
1. Adhere
2. Adequate pain control
3. Activity as tolerated

POST-OP DAY 1
1. Adhere
2. Adequate pain control
3. Activity as tolerated
4. Activity as tolerated

DISCHARGE: POST 2
1. Mobile to shelter
2. Adequate pain control
3. Activity as tolerated
4. Insertion dry and intact
5. Patient optimize teaching completed and are able to
   provide education to parent and child on post-operative procedure, provide GT
   pamphlet
6. Return to normal activity

PHYSICAL ASSESSMENT
1. Obtain pulse, BP, O2 status, assess for dehydration
2. Assess pain
3. Complete physical exam
4. Complete wound assessment
5. Complete bowel preparation

MEDICATION
1. Administer oral or IV antibiotics as per physicians order
2. Administer IV antibiotics (if allergy
3. Administer vitamins as needed
4. Provide electrolyte replacement drinks
5. Pain management

LABS
1. Obtain accurate CBC with differential
2. Obtain cross-match
3. Obtain electrolyte
4. Obtain Urea

DIET
1. Diet as tolerated
2. Clear fluids to diet as tolerated
3. Diet as tolerated
4. Maintain diet

DRESSING
1. Clamping
2. Change
3. Care of dressing
4. Urine output
5. Wound dressing

REVIEW POST-OP DAY 2
1. Review site
2. Review pain
3. Review for signs and symptoms of wound infection
4. Review for signs of peritonitis
5. Review when to call IGT office

REVIEW POST-OP DAY 3
1. Call IGT office
2. Review pain
3. Review for signs and symptoms of wound infection
4. Review post-op day 3 dressing
5. Review for signs of peritonitis

REVIEW POST-OP DAY 4
1. Call IGT office
2. Review pain
3. Review for signs and symptoms of wound infection
4. Review post-op day 4 dressing

REVIEW POST-OP DAY 5
1. Call IGT office
2. Review pain
3. Review for signs and symptoms of wound infection
4. Review post-op day 5 dressing

EDUCATION
1. Reassure parents and child that GT is temporary
2. Teach family of GT care
3. Teach family to monitor for signs of infection
4. Teach family to monitor for signs of peritonitis
5. Teach family to keep dressing intact
6. Teach family to keep dressing clean
7. Teach family to keep dressing dry

Tips for proper care of GT:
1. Keep GT dressing dry and clean
2. Keep GT dressing well-ventilated
3. Keep GT dressing well-appressed

Contact Information:
1. Hospital
2. IGT office
3. Home Health Agency
4. Primary care physician
5. Emergency Department

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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


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### 5.0 Guideline Group and Reviewers

**Guideline Group Membership**

1. Kimberly Colapinto RN (EC), MN, NP General Surgery
2. Monping Chiang RN (EC), MN, NP General Surgery
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**Internal Reviewers**

1. Joao Amaral MD
2. Jacob Langer MD

**Related Documents:**

- *Pain Assessment Guidelines*
- *Pain Management Guidelines*
- *Fluid and Electrolyte Management*
- *Pre-operative Bathing Standard Work*

**Attachments:**

- [cecostomy_June 16_2017.pdf](#)