Patients taking antipsychotic medications are at increased risk of constipation. Improved monitoring and management of constipation in patients taking antipsychotics could prevent adverse events and outcomes such as paralytic ileus, small bowel obstruction, and death. Thus, early recognition of constipation is vital in the routine surveillance of symptoms. The purpose of this evidence-based project is to develop and implement a care bundle that incorporates the Bristol Stool Form Scale (BSFS), educational modules for staff, and the creation of an electronic health record (EHR) alert system for the early detection and management of constipation in adult patients taking antipsychotic medications. Using the Iowa Model as a guide, this care bundle was designed to help decrease the incidence of severe constipation and prevent serious complications and patient hospitalizations due to unresolved constipation. Data collection of participants’ pre-test and post-test scores and retrospective EHR review were used to analyze project outcomes. A two-tailed paired samples t-test was conducted to examine whether the mean difference between pretest and posttest scores was statistically significant. A chi-square test of independence was also undertaken to determine if participant responses and pre/post-test questions related to BSFS were independent. The two-tailed paired samples t-test and Chi-square test results will be considered significant based on an alpha value of <.05 following data analysis.

Keywords: constipation, antipsychotic medications, systematic review, fecal impaction, screening, prevention, and management