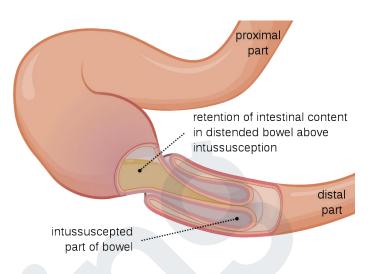
# **INTUSSUSCEPTION PATHOCHART**

### **PATHOPHYSIOLOGY**

The most common cause of bowel obstruction in children is intussusception. It is a telescoping movement where part of the intestine slides over itself making the intestine shorter, as if closing a telescope. When this happens, the intestine begins to swell from inflammation, food can't pass through and the blood supply is cut off. Tissue death, bowel perforation and infection may occur.

### **ASSESSMENT FINDINGS**

- Colicky abdominal pain
- Crying or fussiness
- Fever
- Blood and mucus in stool (red currant jelly stools)
- Lethargy
- Vomiting or Diarrhea
- Palpable lump in abdomen



By Olek Remesz (wiki-pl: Orem, commons: Orem) - Own work, CC BY-SA 3.0, https://commons.wikimedia.org/w/index.php?curid-29764342

### **DIAGNOSTICS**

- Ultrasound
- X-ray

- CT Scan
- Barium enema

### **NURSING PRIORITIES**

- Promote comfort
- Address elimination needs
- Ensure adequate nutrition

# THERAPEUTIC MANAGEMENT

- May self-correct with enema or time
- May require surgical intervention
- NG tube for gastric decompression
- Monitor for and treat dehydration
- Assess and monitor abdominal pain
- Assess and monitor stool characteristics

# **MEDICATION THERAPY**

Analgesics

IV fluids

