

This guideline is intended for clinical use by outpatient and ED providers, inpatient providers, and phone triage

Admission criteria

- > Altered mental status
- Lethargy
- > Persistent vomiting
- > Hypotension
- Persistent dehydration score of 3 or 4

Initial ORT

- <1yr: 5ml q5 minutes</p>
- > ≥1yr: 10ml q5 minutes >
- If tolerates for 20 minutes, advance

Generally Not Recommended

- Labs
- > IVFs
- Imaging studies
- > Antidiarrheals
- Antibiotics

Advanced ORT

- > <1yr: 10ml q5 minutes
- > ≥1yr: 20ml q5 minutes
- If tolerates for 20 min, can discharge

Inclusion criteria

- > Age ≥ 6 months with diarrhea +/- vomiting
- Less than 7 days of symptoms

Exclusion criteria

- Comorbid conditions (metabolic disorder, underlying cardiac or kidney disease, immunodeficiency, failure to thrive)
- > Home use of diuretics or ACE inhibitors
- > Vomiting alone or bilious emesis
- > Bloody diarrhea
- > Surgical abdomen
- Toxic appearance/ unstable vital signs
- Transfer from OSH or clinic, already on IVFs

<u>Discharge criteria</u>

- Sufficient rehydration indicated by wt gain or clinical status
- > No IVFs required
- Urine output reviewed
- Family education provided
- Follow up with PCP available

Discharge Instructions

- Educate (patient hand-outs including ORT instructions)
- > Start healthy, age-appropriate diet
- Continue ORT for additional 4-6 hours at home if started in ED/ clinic
- > Ensure that patient has a PCP for follow up

Acute Gastroenteritis

Clinical Practice Guidelines



References

- ➤ Atherly-John Y, Cunningham S, Crain E. A Randomized Trial of Oral vs Intravenous Rehydration in the Pediatric Emergency Department. Arch Pediatr Adolesc Med 2002; 156:1240-43.
- ➤ Cincinnati Children's Hospital. Acute Gastroenteritis Clinical Care Guidelines. Cincinnati (OH): Cincinnati Children's Hospital. 1999.
- ➤ DeCamp LR, Byerley JS, Doshi N, Steiner MJ. Use of antiemetic agents in acute gastroenteritis: a systematic review and meta-analysis. Arch Pediatr Adolesc Med 2008 Sep;162(9):858-65.
- ➤ Gorelick M, Shaw K, Murphy K. Validity and Reliability of Clinical Signs in the Diagnosis of Dehydration in Children. Pediatrics 1997; 99 (5).
- ➤ Guerrant R, Van Gilder T, Steiner T. Practice Guidelines for the Management of Infectious Diarrhea. IDSA Guidelines. Clinical Infectious Diseases 2001; 32:331–50
- > Seattle Children's Hospital. Acute Gastroenteritis Pathway. Seattle (WA): Seattle Children's Hospital. 2011.
- ➤ Spandorfer P, Alessandrini E, Joffe M, et al. Oral versus Intravenous Rheydraiton of Moderately Dehydrated Children: A Randomized, Controlled Trial. Pediatrics 2—5; 115: 295-301.
- ➤ Steiner M, DeWalt D, Byerly J. Is this Child Dehydrated? JAMA 2004; 291: 2746-2754.
- Szajewska H, Guarino A, Hojsak I, et al. Use of Probiotics for Management of Acute Gastroenteritis: A Position Paper by the ESPGHAN Working Group for Probiotics and Prebiotics. JPGN 2014; 58: 531–9.
- ➤ Wathen J, MacKenzie T, Bothner J. Usefulness of the Serum Electrolyte Panel in the Management of Pediatric Dehydration Treated with Intravenously Administered Fluids. Pediatrics 2004; 114: 1227-34.