



PATIENT INFORMATION

Advice for Parents Caring for a Child with Diarrhoea and Vomiting at Home

Gastroenteritis is usually caused by viral infections, most commonly rotavirus, adenovirus and norovirus. Diarrhoea usually lasts for 5-7 days, vomiting usually lasts for 1-2 days. You should seek further advice from a healthcare professional if your child's symptoms do not resolve by these times.

Most children with gastroenteritis can be safely managed at home

- continue usual feeds, including breast or other milk feeds
- encourage your child to drink plenty of fluids
- discourage the drinking of fruit juices and fizzy drinks

If you have been told that your child is dehydrated by a doctor or nurse you can use the chart on page 3 to guide you in giving the correct amount of fluid (ideally Oral Rehydration Solution) in frequent, small volumes to rehydrate him/her.

Children who are more likely than others to get dehydrated should be offered Oral Rehydration Solution) (such as Dioralyte) in addition to other fluids:

- children less than 1 year, particularly those less than 6 months or who were low birth weight
- children who have passed more than five diarrhoeal stools in the previous 24 hours
- children who have vomited more than twice in the previous 24 hours
- children who are already significantly underweight

If you have been told or believe they are dehydrated and are not tolerating fluids, or you have concerns that your child is developing symptoms of dehydration, you should contact a healthcare professional such as your GP, NHS 111, local Minor Injuries Unit or return to the Emergency Department.

The following symptoms may indicate dehydration:

- appearing to get more unwell
- becoming more irritable or lethargic
- decreased urine output – fewer or lighter wet nappies, older child weeing much less than normal
- pale or mottled skin
- cold fingers/toes

After rehydration:

- encourage your child to drink plenty of their usual fluids, including milk feeds if these were stopped
- avoid giving fruit juices and fizzy drinks until the diarrhoea has stopped
- reintroduce usual diet
- offer a small drink of Oral Rehydration Solution (such as Dioralyte) after each large watery stool if your child is at increased risk of dehydration (see list on page1)

Preventing spread of diarrhoea and vomiting

- washing hands with soap (liquid if possible) in warm running water and careful drying are the most important factors in preventing the spread of gastroenteritis
- hands should be washed after going to the toilet (children) or changing nappies (parents/carers) and before preparing, serving or eating food
- towels used by infected children should not be shared
- children should not attend any school or other childcare facility while they have diarrhoea or vomiting caused by gastroenteritis
- children should not go back to their school or other childcare facility until at least 48 hours after the last episode of diarrhoea or vomiting
- children should not swim in swimming pools for 2 weeks after the last episode of diarrhoea

Please use Oral Fluid Rehydration for Children form – Page 3

Oral Fluid Rehydration for Children	Name
	ED/Hospital/NHS Number
	DoB
	Date and Time / / - - : -

Dear Parent / Carer,

Your child needs to drink **small** volumes of fluid (ideally oral rehydration solution) **frequently** to rehydrate them. Too much, too soon may worsen vomiting. The nurse or doctor will advise you how much fluid (in millilitres), measured using the syringe provided, should be given every ten minutes. Write in the boxes below each time your child has a drink, and also mark down if your child vomits or has diarrhoea. Thank you.

Hour	Minutes	Fluid given	Vomiting / Diarrhoea
	0 - 10		
	10 - 20		
	20 - 30		
	30 - 40		
	40 - 50		
	50 - 60		
	0 - 10		
	10 - 20		
	20 - 30		
	30 - 40		
	40 - 50		
	50 - 60		
	0 - 10		
	10 - 20		
	20 - 30		
	30 - 40		
	40 - 50		
	50 - 60		
	0 - 10		
	10 - 20		
	20 - 30		
	30 - 40		
	40 - 50		
	50 - 60		

Weight range (kg)	5-10	10-15	20-30	30-40	40-50	50-60	60+
Start with this amount every 10 minutes for the first hour (=maintenance + rehydrate 5% over 24hr)	5	10	15	20	30	35	40
If tolerating this amount gradually increase upto: (mls every 10min for maximum 4 hrs) (maintenance + rehydrate 5% over 4hr)	10	30	50	70	90	110	140

After this rehydration treatment allow child to drink freely

see other side of sheet for advice for reintroducing normal diet and fluids

NICE Diarrhoea and Vomiting guideline recommends rehydrating children over 4hours with maintenance: (0-10kg: 100ml/kg/day, 10-20kg: (1000+((wt-10)x50))ml/day, 20kg+: (1500+((wt-20)x20))ml/day + 50ml/kg for rehydration assuming 5% dehydration. This will rehydrate children more quickly, reduce ketosis and may reduce nausea but may be less well tolerated than rehydration over 24 hours. The guide above is based on a pragmatic approach of starting at the standard (24hour) rate and building up to larger volumes if the child is tolerating. The same principle applies if using Nasogastric fluids but not if using IV fluids where 24 or 48 hour rehydration rates are used.