**ED/UC GASTROENTERITIS ALGORITHM**

**Inclusion Criteria:**
- Presumed Gastroenteritis
- Age >6mo and Weight >8Kg
- Acute vomiting and/or diarrhea

**Exclusion Criteria:**
- Severe dehydration/toxic appearing
- Chronic Conditions, any cardiac hx
- Bilious Emesis, Blood in vomit/stool
- Seen in past 72hrs for GI symptoms
- Possible surgical abdomen
- Altered mental status
- Severe headache

---

**Mild Dehydration***

- Tolerating Fluids?
  - Yes: Discharge Home with ORT education
  - No: Ondansetron

---

**Moderate Dehydration***

- Tolerating Fluids?
  - Yes: Start ORT
  - No: Ondansetron

---

**Severe Dehydration***

- Tolerating Fluids and Normal HR?
  - Yes: IV Fluid Bolus (Over 30-60min)
    - Blood Glucose
    - Consider BMP, UA
    - Continue ORT
  - No: Off Pathway

---

**Signs and Symptoms of Dehydration**
- Consider Mild if <3 of the following:
  - Decreased urine output
  - Activity decreased
  - Heart Rate increased for age
  - Respiration Increased or Abnormal
  - Capillary Refill >2sec
  - Dry Mucus Membranes
  - Decreased Tears
  - Sunken Eyes
  - Decreased Skin Turgor
  - Abnormal Pulses/Perfusion

---

**Consider Outpt Rx of 1-2 doses of ondansetron (excluding non-verbal children) with strict return precautions**

---

**Consider Outpt Rx of 1-2 doses of ondansetron (excluding non-verbal children) with strict return precautions**

---

**Discharge Home with ORT education**
TARGET POPULATION

Inclusion Criteria:
- Presumed Gastroenteritis
- Age >6mo and Weight >8Kg
- Acute vomiting and/or diarrhea

Exclusion Criteria:
- Chronic Condition (VP shunt, cardiac, renal, DKA, metabolic, etc.)
- G-tube
- Bilious Emesis
- Blood in vomit/stool (hematemesis, hematochezia)
- Seen in the ED/UC in the past 72hrs for GI symptoms
- Severe dehydration/toxic appearing
- Possible surgical abdomen
- Altered mental status
- Severe headache

BACKGROUND | DEFINITIONS

Acute gastroenteritis (AGE) is “defined as three or more episodes of diarrhea and/or vomiting and possibly accompanied by other symptoms including fever, nausea, or abdominal pain that results from gastrointestinal inflammation” 2

Oral rehydration therapy (ORT) is a non-invasive, rehydration method used in patient with mild-moderate gastroenteritis.

INITIAL EVALUATION

- Vital signs
- History and physical exam
• Laboratory evaluation is rarely indicated (Consider for moderate to severe dehydration, change in urination, weight loss)
  - Serum Glucose
  - BMP
  - Urinalysis

**CLINICAL MANAGEMENT**

**Oral Rehydration Therapy (ORT)**

<table>
<thead>
<tr>
<th>Preferred Oral Fluid</th>
<th>6-12mo</th>
<th>12mo-3yrs</th>
<th>3yrs-8yrs</th>
<th>&gt;8yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pedialyte or breast milk</td>
<td>5mL q 5min x20min then 10mL q 5min</td>
<td>10mL q 5min x20min then 20mL q 5min</td>
<td>15mL q 5min x20min then 30mL q 5min</td>
<td>15mL q 3min x20min then 30mL q 3min</td>
</tr>
<tr>
<td>*Note: if the patient is nursing, have MOC breastfeed for 2min every 5min for a total of 5 feedings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Rate**

- 5mL q 5min x20min then 10mL q 5min
- 10mL q 5min x20min then 20mL q 5min
- 15mL q 5min x20min then 30mL q 5min
- 15mL q 3min x20min then 30mL q 3min

**Minimum Recommended Volume Prior to Discharge**

- 60mL
- 120mL
- 180mL
- 180mL

**LABORATORY STUDIES | IMAGING**

- No imaging studies are recommended for acute, mild-moderate gastroenteritis.
- Laboratory evaluation is rarely indicated (Consider for moderate to severe dehydration, change in urination, weight loss)
  - Serum Glucose
  - BMP
  - Urinalysis

**THERAPEUTICS**

**Ondansetron**

Oral disintegrating tab: Link to Lexicomp

- 8-15kg: 2mg/dose once
- >15-30kg: 4mg/dose once
- >30kg: 4-8mg/dose once

**IV Fluid Bolus**

Normal Saline: 20mL/kg (Max 1,000mL/single bolus) over 30-60min

**PARENT | CAREGIVER EDUCATION**

Use DC Gastroenteritis Smart Set
REFERENCES

1. Evidence Based Guideline for Dehydration and Gastroenteritis, Boston Children’s Hospital, updated 1/29/16.


**Clinical Care Guidelines/Quality**

<table>
<thead>
<tr>
<th>MANUAL/DEPARTMENT</th>
<th>Clinical Care Guidelines/Quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORIGINATION DATE</td>
<td>2/14/2017</td>
</tr>
<tr>
<td>LAST DATE OF REVIEW OR REVISION</td>
<td>2/14/2017</td>
</tr>
<tr>
<td>APPROVED BY</td>
<td>Lalit Bajaj, MD, MPH</td>
</tr>
<tr>
<td></td>
<td>Medical Director, Clinical Effectiveness</td>
</tr>
</tbody>
</table>

**REVIEW | REVISION SCHEDULE**

Scheduled for full review on February 14, 2021.

Clinical pathways are intended for informational purposes only. They are current at the date of publication and are reviewed on a regular basis to align with the best available evidence. Some information and links may not be available to external viewers. External viewers are encouraged to consult other available sources if needed to confirm and supplement the content presented in the clinical pathways. Clinical pathways are not intended to take the place of a physician’s or other health care provider’s advice, and is not intended to diagnose, treat, cure or prevent any disease or other medical condition. The information should not be used in place of a visit, call, consultation or advice of a physician or other health care provider. Furthermore, the information is provided for use solely at your own risk. CHCO accepts no liability for the content, or for the consequences of any actions taken on the basis of the information provided. The information provided to you and the actions taken thereof are provided on an “as is” basis without any warranty of any kind, express or implied, from CHCO. CHCO declares no affiliation, sponsorship, nor any partnerships with any listed organization, or its respective directors, officers, employees, agents, contractors, affiliates, and representatives.
Discrimination is Against the Law. Children's Hospital Colorado complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Children’s Hospital Colorado does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Children's Hospital Colorado provides free aids and services to people with disabilities to communicate effectively with us, such as: Qualified sign language interpreters, written information in other formats (large print, audio, accessible electronic formats, other formats). Children’s Hospital Colorado provides free language services to people whose primary language is not English, such as: Qualified interpreters, information written in other languages.

If you need these services, contact the Medical Interpreters Department at 720.777.9800.

If you believe that Children’s Hospital Colorado has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Corporate Compliance Officer, 13123 E. 10th Avenue, B450, Aurora, Colorado 80045, Phone: 720.777.1234, Fax: 720.777.7257, corporate.compliance@childrenscolorado.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Corporate Compliance Officer is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at corportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7597 (TDD) Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

Children’s Hospital Colorado complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-720-777-9600.


注意: 如您使用繁體中文，您可以免費獲得語言援助服務。請致電1-720-777-9800。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-720-777-9800.

BMWIA: Ei o le theya a le New York, ba baam ley a le English, ba baam ley a le New York, ba baam ley a le English, ba baam ley a le English.


注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-720-777-9800 まで、お電話にてご連絡ください。