Gastroenteritis Pathway (NB D&V is not always due to Gastroenteritis)

**Triage**
- **Thirsty**
  - Alert
  - Producing urine
  - Normotensive fontanelle
  - Dry mouth
- **Alert**
  - Oliguria
  - Slightly sunken fontanelle
  - Sunken eyes
  - Dry mucous membranes
  - Tachycardia

**Triage**
- **Minimal** (<5% WL)
- **Clinical dehydration** (6-10% WL)
- **Severe dehydration** (>10% WL)

**30 minutes later**
- **Successful**
  - Continue Oral fluid challenge and await to be seen by a doctor
  - More fluid in than out!
- **Unsuccessful**
  - One dose of Oral rehydration 4 mg (age > 2 yrs)
  - Repeat Oral fluid challenge with Dioralyte
  - Apply Aetrop

**Vomiting**
- **Vomiting resolved**
  - Confirmed diagnosis of gastroenteritis
  - Oral fluid challenge tolerated
  - Hydration status improved
  - Discharge home
  - Continue Dioralyte for 6 hours and then return to normal diet

**Vomiting**
- **Vomiting resolved**
  - Regular review
  - Reduce IV fluid rate once tolerating fluids

**WL** = weight loss
**CRT** = capillary refill time

Read also dehydration guideline
*Hypernatraemic Dehydration management differs- see Dehydration guideline

Author: Dr Alison Groves, Consultant Paediatrician
Date: September 2011
Presented to & agreed by: Paediatric Departmental Meeting: Monday 12th September 2011
Ratified by: Dr Gillian Baksh on behalf of Children’s Services Clinical Governance Committee in September 2011
Review date: September 2013