## Diarrhoea and vomiting pathway





## Clinical support tool for remote clinical assessment

This pathway is largely written for an eventual diagnosis of infectious gastroentritis - however please be alert to the following symptoms that may raise the possibility of a more concerning diagnosis: • Fever: Temperature of > 38°C • Shortness of breath • Altered state of consciousness • Signs of meningism • Blood in stool • Bilious (green) vomit • Vomiting alone • Recent head Injury • Recent burn • Severe localised abdominal pain • Abdominal distension.

Clinical findings	Green – Iow risk	Amber – intermediate risk	Red – high risk
Age		Under 3 months	
Behaviour	<ul><li>Content/smiles</li><li>Stays awake/awakens quickly</li><li>Strong normal crying/not crying</li></ul>	No smile     Decreased activity/lethargic     Irritable	<ul> <li>No response</li> <li>Unable to rouse or if roused does not stay awake</li> <li>Clinical concerns about nature of cry (weak, high pitched or continuous)</li> </ul>
Skin	Normal skin colour     Warm extremities		Pale/mottled/blue     Cold extremities
Hydration	<ul><li>Moist tongue and conjunctivae</li><li>Fontanelle normal</li></ul>	Dry tongue and conjunctivae     Sunken fontanelle	
Urine output	Normal	Reduced / not passed urine in past 12 hours	No urine for 24 hours
Respiratory	Normal pattern and rate		Abnormal/fast breathing
Eyes	Not sunken	Sunken eyes	
Other		<ul> <li>Additional parent/carer concerns</li> <li>Age 3-6 months with temp ≥39° (102.2°F) with no clear focus of infection</li> </ul>	<ul> <li>Bloody diarrhoea</li> <li>Blood in vomit</li> <li>Dark green (bilious) vomiting</li> <li>Age 0-3 months with temp ≥38° (100.4°F)</li> </ul>



<u>Provide diarrhoea and vomiting safety netting advice</u>

Confirm they are comfortable with the decisions/ advice given

Always consider safeguarding issues
Lower threshold for referral to primary care if
have long term condition ie diabetes
Lower threshold for referral in those with
increased risk of dehydration\*

## **Amber Action**

Consider video consultation

and/or

refer to primary care service for review

## **Red Action**

Refer immediately to emergency care – consider whether 999 transfer or parent/taxi most appropriate based on clinical acuity etc.

\*Children with increased risk of dehydration

>3 vomits wihin 24 hours

>6 episodes of diarrhoea within 24 hours

Not tolerating fluids

History of faltering growth

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