Gastroenteritis in children < 5 yrs

Face to face assessment in the community



Any of the following may indicate diagnoses **other than** gastroenteritis

- temperature of 38°C or higher (younger than 3 months)
- temperature of 39°C or higher (3 months or older)
- shortness of breath or tachypnoea
- altered conscious state
- neck stiffness
- bulging fontanelle (in infants)
- non-blanching rash
- blood and/or mucus in stool
- bilious (green) vomit
- severe or localised abdominal pain
- abdominal distension or rebound tenderness

These children are at increased risk of dehydration:

- children younger than 1 year, especially those younger than 6 months
- infants who were of low birth weight
- children who have passed six or more diarrhoeal stools in the past 24 hours
- children who have vomited three times or more in the past 24 hours
- children who have not been offered or have not been able to tolerate supplementary fluids before presentation
- infants who have stopped breastfeeding during the illness
- children with signs of malnutrition

Children who will be managed at home or do not need to be referred

| No clinically detectable dehydration | Clinical dehydration |
|---|--|
| Alert and responsive | Alert and responsive |
| Moist mucous membranes (except after drink) | Dry mucous membranes (except for 'mouth breather') |
| Skin colour unchanged | Skin colour unchanged |
| Normal blood pressure | Normal blood pressure |
| Normal peripheral pulses | Normal peripheral pulses |
| Warm extremities | Warm extremities |
| Normal capillary refill time | Normal capillary refill time |

Children with symptoms suggesting shock

| Clinical dehydration | Clinical shock |
|--|----------------------------------|
| Appears to be unwell or deteriorating | - |
| Tachypnoea | Tachypnoea |
| Altered responsiveness (for example, irritable, lethargic) | Decreased level of consciousness |
| Sunken eyes | - |
| Reduced skin turgor | - |

Preventing dehydration

- Continue breastfeeding and other milk fluids
- Encourage fluid intake
- Discourage fruit juices and carbonated drinks (especially in children at increased risk of dehydration)
- Offer low osmolarity ORS solution⁵ as supplemental fluid if at increased risk of dehydration.

Consider a repeat face-to-face assessment

Advise parents and carers to contact a healthcare professional if:

- symptoms of dehydration develop
- symptoms do not resolve as expected
- their child refuses to drink ORS solution of persistently vomits

