Diarrhoea and vomiting pathway



Clinical support tool for remote clinical assessment

This pathway is largely written for an eventual diagnosis of infectious gastroenteritis - 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 risl
Age		Under 3 months	
Behaviour	 Content/smiles Stays awake/awakens quickly Strong normal crying/not crying 	 No smile Decreased activity/lethargic Irritable 	 No response Unable to rouse Clinical concern continuous)
Skin	Normal skin colourWarm extremities		Pale/mottled/bluCold extremities
Hydration	Moist tongue and conjunctivaeFontanelle normal	Dry tongue and conjuctivaeSunken fontanelle	
Urine output	Normal	Reduced/not passed urine in past 12 hours	No urine for 24
Respiratory	Normal pattern and rate		Abnormal/fast b
Eyes	Not sunken	Sunken eyes	Sunken eyes
Other		 Additional parent/carer concerns Age 3-6 months with temp ≥ 39^o (102)^o F with no clear focus of infection 	 Bloody diarrhoe Blood in vomit Dark green (bilid Age 0-3 months

Please follow the highest risk pathway e.g. if any red criteria met follow the red pathway.	Green Action	Amber Action	Red Action
	Provide diarrhoea and vomiting <u>safety netting advice</u> Confirm they are comfortable with the decisions/advice given Always consider safeguarding issues Lower threshold for referral in those with increased risk of dehydration*	Consider video consultation and /or refer to primary care service for review. Urgent Care pathways: Consider referral to children's community nursing team <u>HERE</u>	Refer immediately to e transfer or parent/taxi r Have vomited three tim Has had six or more ep Not tolerating fluids History of faltering grow

The guidance has been reviewed and adapted by healthcare professionals across HWE with consent from the Healthier Together Steering group

This document was arrived at after careful consideration of the evidence available including but not exclusively NICE, SIGN, EBM data and NHS evidence, as applicable. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient in consultation with the patient and / or carer

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4 hours
breathing
Dea
lious) vomiting ns with temp ≥ 38º (100.4º F)

emergency care – consider whether 999 xi most appropriate based on clinical acuity etc. times or more in the last 24 hours episodes of diarrhoea in the past 24 hours

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