

# Gastroenteritis Advice Sheet

## (diarrhoea and/or vomiting)

### Advice for parents and carers of children younger than 5 years

Name of child	Age	Date/time advice given
Further advice/follow up		
Name of professional		Signature of professional

## How is your child? (traffic light advice)

 <b>Red</b>	<p>If your child has any one of these symptoms:</p> <ul style="list-style-type: none"> <li>● becomes difficult to rouse/unresponsive</li> <li>● becomes pale and floppy</li> <li>● is finding it difficult to breathe</li> <li>● has cold feet and hands</li> <li>● has diabetes</li> </ul>	<p><b>You need urgent help</b> Please phone 999 or go to the nearest Hospital Emergency Department</p>
 <b>Amber</b>	<p>If your child has any one of these symptoms:</p> <ul style="list-style-type: none"> <li>● seems dehydrated, ie. dry mouth, sunken eyes, no tears, sunken fontanelle (soft spot on baby's head), drowsy or passing less urine than normal</li> <li>● has blood in the stool (poo) or constant tummy pain</li> <li>● has had 6 or more episodes of diarrhoea in 24 hours</li> <li>● has had 3 or more vomits in 24 hours</li> <li>● becomes irritable or lethargic</li> <li>● is breathing rapidly or deeply</li> <li>● is under 3 months old</li> </ul>	<p><b>You need to contact a doctor or nurse today</b> Please ring your GP surgery or call NHS 111 – dial 111</p>
 <b>Green</b>	<p>If none of the above features are present, most children with diarrhoea and/or vomiting can be safely managed at home.</p> <p>However, some children are more likely to become dehydrated including: children younger than 1 year old or if they had a low birth weight. In these cases, or if you still have concerns about your child, please contact your GP surgery or call NHS 111.</p>	<p><b>Self care</b> Using the advice overleaf you can provide the care your child needs at home</p>

## Some useful phone numbers (you may want to add some numbers on here too)

	<p><b>GP surgery</b> (note the number here):</p> <p><b>Health visiting team:</b></p>	<p><b>NHS111</b> is a service available 24 hours a day, 365 days a year to make it easier for you to access NHS healthcare services in England. Dial 111 when you need medical help fast but it is not a 999 emergency.</p>
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For online advice: NHS Choices [www.nhs.uk](http://www.nhs.uk) (available 24 hours, 7 days a week)

Family Information Service: telephone 0300 200 1004

[www.surreycc.gov.uk/people-and-community/family-information-service](http://www.surreycc.gov.uk/people-and-community/family-information-service)

If you need language support or translation please inform the member of staff to whom you are speaking.

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#### About Gastroenteritis

Severe diarrhoea and / or vomiting can lead to dehydration, which is when the body does not have enough water or the right balance of salts to carry out its normal functions. If the dehydration becomes severe it can be dangerous. Children at increased risk of dehydration include: young babies under 1 year old (and especially those under 6 months), those born at a low birth weight, 6 or more episodes of diarrhoea in the past 24 hours, vomited 3 times or more in the last 24 hours, those who have stopped drinking or breastfeeding during the illness and children with malnutrition or with faltering growth.

#### How can I look after my child?

- Diarrhoea can often last between 5–7 days and stops within 2 weeks. Vomiting does not usually last for more than 3 days. If your child continues to be ill longer than these periods, seek advice.
- Continue to offer your child their usual feeds, including breast or other milk feeds.
- Encourage your child to drink plenty of fluids, little and often is best - It is advisable not to give fizzy drinks and/or fruit juices as they can make diarrhoea worse.
- Your healthcare professional may recommend that you give your child a special fluid known as Oral Rehydration Solution (ORS) eg. Dioralyte. This can be purchased over the counter at large supermarkets and pharmacies and can help prevent dehydration from occurring. It is also used to treat children who have become dehydrated.
- Mixing the contents of the ORS sachet in dilute squash (not 'sugar-free' squash) instead of water may improve the taste.
- Do not worry if your child is not interested in solid food, but offer food if hungry.
- If your child has other symptoms like a high temperature, neck stiffness or rash please ask for advice from a health care professional.
- Your child may have stomach cramps; if simple painkillers do not help please seek further advice.
- If your child is due routine immunisations please discuss this with your GP or practice nurse, as they may not need to be delayed.
- Hand washing is the best way to stop gastroenteritis spreading.

#### After care

Once your child is rehydrated and no longer vomiting:

- continue breastfeeding, other milk feeds and fluid intake - give full strength milk straight away
- reintroduce the child's usual food
- avoid giving fruit juices or fizzy drinks until the diarrhoea has stopped
- if dehydration recurs, start giving ORS again
- anti-diarrhoeal medicines (also called Antimotility drugs) should not be given to children\*.

#### Preventing the spread of Gastroenteritis (diarrhoea and/or vomiting)



You and/or your child should wash your hands with soap (liquid if possible) in warm running water and then dry them carefully:

- After going to the toilet
- After changing nappies
- Before touching food



Your child should not:

- Share his or her towels with anyone
- Go to school or any other childcare facility until 48 hours after the last episode of diarrhoea/vomiting
- Swim in swimming pools until 2 weeks after the diarrhoea has stopped

This guidance is written in the following context: this document is based on NICE Guidance which was arrived at after careful consideration of the evidence available. 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 them.