

Acute Gastroenteritis (AGE) Clinical Practice Guideline

Emergency Department Management

FINAL
5.3.18



Patient Presents with ≥ 3 loose stools in 24 hrs.^{1,2}
+/- vomiting; +/- fever

Score the Clinical Dehydration Scale (CDS)
Score each element as 0, 1, or 2 for a total score from 0-8

[Characteristics]	[0]	[1]	[2]
General appearance	Normal	Thirsty, Restless or Lethargic, but irritable when touched	Drowsy, limp, cold or sweaty, +/- comatose
Eyes	Normal	Slightly sunken	Extremely sunken
Mucous membrane (tongue)	Moist	Sticky	Dry
Tears	Tears	Decreased tears	Absent tears

JPGN. Volume 59, number 1, July 2014, validated for patients < 3yrs, in older patients clinical judgement may supersede the CDS score

¹ Inclusion Criteria

- Patients > 90 days of age
- ≥ 3 loose stools in 24 hrs. **Or** any loose stools with vomiting
- Acute AGE is < 7 days of loose stools

² Exclusion Criteria

- History of Chronic/Complex diagnoses (see Feudtner Exclusion List)
- Patients < 90 days
- Hypo/HyperNatremia or Hypo/HyperKalemia (once confirmed remove from guideline)

³ Oral Challenge

- If vomiting give Ondansetron⁴ and wait 15 min
- Give 5-10ml oral rehydration⁵ every 5 min X 15 min
- If emesis – wait 15 min and try again.
- If patient < 2yrs and REFUSES oral fluids, and no vomiting, try oral syringe
- If patient continues with emesis stop oral challenge and start IV

⁴ Ondansetron Dosing

Pt. wt. 8kg to \leq 15kg 2mg ODT
Pt. wt. > 15 kg 4mg ODT

⁵ Oral Rehydration

- Avoid high carbohydrate liquids and optimize with low osmols and higher Na**
- Preferred > 1yr Pedialyte then try sports drink
 - Infants < 1yr: Enfalyte oral, syringe or NG
- ORAL REHYDRATION GOAL:**
Maintains oral hydration with a minimum of < 10 kg: 60ml or >10 kg: 120ml over 30 min

⁶ NG Rehydration

- NG may be placed if pt. < 2years, **NO** emesis **AND** refusing PO
- **And** unable to obtain IV or Parents refuse IV
- Strongly consider admission Hydrate with: Enfalyte 10-20 ml/kg over 30 min

⁷ Discharge Medications

- ***Ondansetron:** Evidence supports giving one dose of Zofran in ED/UC, be aware that multi doses may prolong diarrhea
- ***Probiotic:** Limited evidence suggest some improvement but not clear to support use in every patient

GI PCR and Stool Culture

- GI PCR Panel is NOT necessary for all patients with diarrhea**
May consider Sending PCR for:
- Severe illness (severe abd. pain, tenderness \pm fever)
 - Prolonged symptoms >7 Days
 - Travel related diarrhea if persistent or with fever
 - Persistent Fever
 - Bloody diarrhea esp. if mucoid
 - Do not order a stool culture if PCR is ordered
- PCR PANEL DOES NOT INCLUDE C-DIFF**

