

What now?

The doctor has examined your child and has diagnosed him/her with mild gastro. Your child does not need to stay in hospital but can be managed at home. The next few sections explain to you how to do this, what to expect and when you need to bring your child back to the hospital. A Nurse will explain the process with you, give you a Take Home Trial of Fluids Pack and answer any questions you may have about managing your child at home. The 'Pack' gives you all the instructions you need as well as information about when you might need to seek medical advice again.

Take Home Trial of Fluids Pack

Included in you pack is

1. Gastroenteritis Information Sheet
2. A couple of sachets of Hydralyte for you to start the Trial of Fluids.
You can buy these from your local Pharmacy
3. A small measuring cup
4. A Trial of Fluids Progress Sheet for you to record your child's progress
5. A vomit bag as your child may vomit on the way home
6. A pack of Jatz biscuits
7. Information sheets you may find helpful during your child's illness

At Home

Once you are home start a **'TRIAL OF FLUIDS' Trial of Fluids**

A 'Trial of Fluids' is giving your child a small amount of **Fluid** (see below) regularly. The hospital recommends 2mls of fluid for every kilo your child weighs (i.e. 20kg child = 40mls of fluid; 35kg child = 70mls of fluid. Your child will have been weighed in hospital so the staff can help you work out the right amount of fluid to give). This amount is to be given every 20 minutes for a period of 3-4 hours.

Recommended Fluids

The recommended **Fluid** for gastro is an Oral Rehydration Solution (ORS) eg. Hydralyte, Gastrolyte, or Pedialyte. These maximise fluid absorption and replace lost body salts. ORS is available at your pharmacy and comes in bottles, iceblocks and sachets. They taste a bit salty so are best cold
If your child is only a little dehydrated or won't take ORS, other forms of fluids include very dilute cordial, diluted apple juice, milk, iceblocks and jelly.
"Energy" or "Electrolyte" drinks are not recommended.

Water is not a recommended fluid. The small amount of sugar in the sweetened drinks helps the water get through the gut, into the body. Too much plain water may actually make your child sicker.

If your child is saying they are hungry try giving them a small dry biscuit (i.e. Jatz), plain rice or toast or a small sweet biscuit (i.e. Milk Arrowroot)

Your child may continue to vomit for the first 1-2 hours of this period which is normal, but you should start to notice a decrease in the amount and regularity of the vomiting. You need to continue to give the clear fluids regularly to help prevent dehydration. If you child vomits within the 20 minute period wait for about 10 minutes for their stomach to settle then recommence the fluid every 20 minutes.

Record your entire child's input and output on the 'trial of Fluids progress Sheet' from your pack. Keeping track of your child's drinking, weeing and amount of diarrhoea can help pick up when they may be getting dehydrated.

As with any illness your child may be tired more than usual. This is normal and it is important that they are allowed to rest but they need to be woken for their fluids.

If your child doesn't want to drink, try using a spoon, syringe, a 'fun' straw, a favourite cup or having a 'tea party' with you child.

Once the vomiting has stopped for a period of about 3-4 hours you can slowly start introducing bland foods, and then a **normal diet** (including milk) for your child. Diarrhoea may still be present through this stage, this is normal and should settle over the next few days. Remember to keep up your child's fluids at this time as the diarrhoea can still cause dehydration. If at any stage your child vomits again revert back to a Trial of Fluids.

Follow-up

It is a good idea to make an appointment with your local doctor (GP) for a few days after your Emergency Department visit for them to check on your child's hydration state and general wellbeing.

If you are concerned about your child's progress please return to the Emergency Department for review.

The PED Discharge Liaison Nurse maybe asked to call you to check on your child's progress. However you can also call the PED Discharge Liaison from 7am to 6pm, 7 days per week on 8161 7000 ask for pager 4651 to talk about your child's current illness.

Fluids for Children with Gastroenteritis

Information for
parents and caregivers

GASTRO INFORMATION

What is it?

Gastroenteritis (Gastro) is an infectious illness, common in children and infants, that is usually caused by a virus. Gastro usually lasts 3-4 days but it can be longer.

Typically gastro begins with vomiting. Children may then develop frequent, watery poos (diarrhoea). Often they also have tummy pain, fever and sometimes a runny nose or sore throat.

Treatment

The main complication with Gastro is dehydration. Under most circumstances children only have mild dehydration and the rehydration process can be managed at home, however there are some instances where your child may require treatment in hospital. The standard rehydration process for gastro is to give a small amount of fluids on a regular basis. This is known as a 'Trial of Fluids' which is described in this brochure. Sometimes the doctor may give some medication to help stop the vomiting. Treatment for the other symptoms that can make your child uncomfortable (e.g. fever, tummy pain, sore throat etc) can be managed with Paracetamol (Panadol). Paracetamol may take up to an hour to relieve your child's pain or temperature.

COMMON QUESTIONS

When can they go back to childcare/school?

Once the diarrhoea has ceased your child is no longer infectious and can return to child care/school.

Can I continue to Breast feed?

If you are breast feeding continue to do so throughout your baby's illness and offer Hydralyte between feeds. You may need to increase the frequency of the feeds.

Stopping the spread

Remember Gastro is easily spread from person to person so it is very important to

- >**Wash your hands** after toileting, changing your child's nappy or cleaning up vomit.
- >Avoid sharing food and drinks
- >Wash soiled clothing separately from the rest of the family laundry
- >Keep your child away from other people until vomiting and diarrhoea has settled

DO YOU NEED TO RETURN TO THE EMERGENCY DEPARTMENT?

Return to the Emergency Department if your child:

- **Continues to have lots of vomiting**
- **Has a lot of diarrhoea (8-10 watery motions or 2-3 large motions per day)**
- **Becomes flat and lethargic during any stage of the trial**
- **Develops severe stomach pain**
- **Develops any other symptoms you are concerned about**
- **Has blood in their vomit or bowel actions**
- **Is more unwell (looks pale, has dry mouth or tongue, has sunken eyes, has cold hands or feet)**
- **Refuses to drink (despite trying the ideas mentioned)**
- **Is not passing urine after 10 hours**
- **Is difficult to wake up**
- **If you are unsure or concerned about your child's progress in any way**

WCH Paediatric Emergency Department

February 2020

