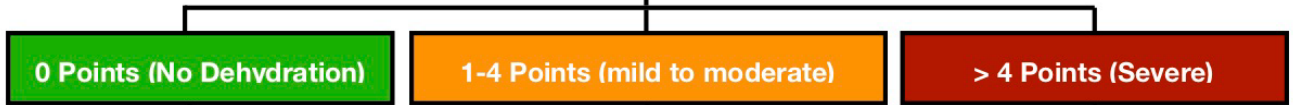


ASSESS LEVEL OF DEHYDRATION AND DOCUMENTS IN EPIC			
	0 points	1 point	2 points
<b>General Appearance</b>	Normal	Thirsty, restless or lethargic but irritable when touched	Drowsy, limp, cold, comatose
<b>Eyes</b>	Normal	Slightly Sunken	Very Sunken
<b>Mucous Membranes</b>	Moist	"Tacky" or "sticky"	Dry
<b>Tears</b>	Tears	Decreased	Absent



**Patient has vomited in the past 4 hours or refusing PO?**

**NO**

Encourage ORT

Tolerates PO Fluid

Patient Vomits

**YES**

**Consider Administering Ondansetron\***

Weight	Ondansetron dose
8-15 kg	2 mg
>15-30 kg	4 mg
>30 kg	8 mg

**Begin ORT:** Oral rehydration therapy is the mainstay of treatment for acute gastroenteritis in patients with only mild to moderate levels of dehydration. This should be achieved by a regimented schedule of small frequent sips of a fluid the patient will accept (electrolyte/glucose containing fluids are preferred). Provide parents with a syringe or medicine cup, fluid and instructions to give the patient the patient the recommended volume (see chart) every 5 minutes (timed) for 30 minutes.

Weight	ORT Goals
<10 kg	10 ml every 5 min
10-20 kg	20 ml every 5 min
> 20 kg	35 ml every 5 min

**EMERGENCY DEPARTMENT In Triage**

- consider ESI 2 if appropriate.
- If signs of hypovolemic shock (significant tachycardia, delayed cap refill, weak pulses or hypotension) consider room priority versus medical team.

**In Treatment Room**

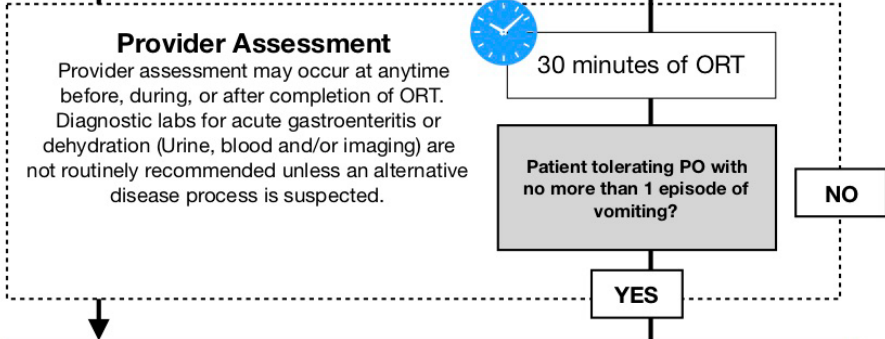
- Notify Provider
- If signs of hypovolemic shock are present establish vascular access and begin fluid resuscitation as appropriate for patient

**URGENT CARE Neighborhood Locations**

- RN notifies Provider
- Provider to consider continued treatment versus transfer to ED

**Liberty/Burnet Urgent Care**

- Provider to determine if patient needs transfer to ED.
- If patient is hypotensive, AMS, lethargic or any concern for hypovolemic shock consider rapid transfer to ED otherwise consider normal transfer to ED



**FOR PATIENTS WITH VOMITING MORE THAN ONCE DURING ORT OR ARE REFUSING PO**

- Consider Ondansetron if not already given and restart 30 min of ORT
- Attempt 15 minutes of ORT with half the recommended volume per aliquot.
- Consider alternative antiemetic
- If severe dehydration is suspected or any significant deterioration in clinical status consider alternative diagnoses and/or transfer to ED if in urgent care location.

**DISCHARGE CRITERIA**

- VS are within normal limits or improving for age
- Parents able to follow standardized discharge instruction
- Reliable f/u is available
- Clinical improvement with reassuring physical exam