

Vomiting & Diarrhea

Signs Of Dehydration

If your child has not urinated in greater than 12 hours and the inside of his/her mouth is dry or sticky to touch, this is a sign of mild to moderate dehydration. In severe dehydration, there are no tears when your child cries (greater than 2 months of age), the eyes seem sunken, there is weight loss, and the skin looks dry and is not as elastic. In an infant the "soft spot" on the top of his/her head (fontanelle) is sunken. The child will appear listless or hard to awaken, acts confused or is disoriented.

Step I - Treatment Of Vomiting & Diarrhea

It is extremely important to make sure that your child/infant is given and takes enough of the right fluids to replace what he/she lost. The signs of dehydration must be corrected.

1) Stop giving milk or milk products, fruit juices such as apple juice, or plain water.

2) Use electrolyte solutions such as **Pedialyte** or **Infalyte**. Wait at least one hour after your child has vomited and start with 1/2 ounce orally every 15 to 20 minutes for several hours. If your child will not take it from a bottle or cup, try a spoon. If none of these work, you need to give fluid orally by syringe. If your older child (> 2 years) refuses to drink these, then try Gatorade, flat gingerale, flat soda, or Welch's white grape juice.

3) If your child keeps this down, gradually increase the amount given as tolerated. If the diarrhea occurs without vomiting, then offer the above mentioned fluids frequently without restriction as to quantity.

Step II - Maintenance Therapy

1) After rehydration, you may continue to breastfeed your child. If your child is formula fed use a low lactose or lactose free formula such as **Enfamil Gentlease** or **Similac Pro-Sensitive**.

2) Encourage food such as **Bananas, Rice, Applesauce, Toast, Wheat Noodles, Potatoes**, or any non-lactose carbohydrate rich food (**BRAT DIET**). In older children you may offer a bland starchy diet as long as it does not contain milk, milk products, or fried, fatty, or greasy foods.

3) Continue with small frequent bland meals and continue encouraging fluids.

4) Increase diet and strength of formula as the child improves. The diet may be reverted to normal once there has been no vomiting and/or diarrhea for 5 days.

5) It is usually not necessary to use any nonprescription antidiarrheal medications.

Please avoid their use unless recommended by me.

Call Me

- 1) If your child is under 2 months of age and the symptoms are associated with a rectal temperature greater than or equal to 100.5 degrees ([see section on fever](#)).
- 2) If your child cannot keep down even small amounts of Pedialyte/ Gatorade. Sometimes I can prescribe suppositories stop the vomiting.
- 3) If vomiting/diarrhea become more severe, frequent or lasts more than 24 hours.
- 4) If your child vomits blood or material that looks like coffee grounds.
- 5) If your child's vomit is green.
- 6) If your child's vomiting is associated with any neck stiffness.
- 7) If your child's diarrhea becomes bloody. (Therefore avoid red colored gatorade!)
- 8) If your child suddenly develops a high fever (above 104F Rectally) that does not come down one hour after administration of the correct dosage of Tylenol either orally or by rectal suppository.
- 9) If your child shows any signs of dehydration (E.G., Dry Mouth, Confusion, Failure To Void).