

Our Emergency department sees a lot of kids experiencing vomiting and diarrhea. Gastroenteritis also known as the "stomach flu" is a common illness caused by a virus or bacteria which in most cases can be managed at home and resolves within a few days. However, it may last one to two weeks.

Vomiting and diarrhea cause your child to lose fluids, sugar, and salt. The primary goal when treating gastroenteritis is to prevent dehydration.

Give small amounts of liquids frequently. Offer your child oral rehydration solution such as sports drinks with balanced sugar and carbohydrates (G2®) or electrolyte solutions (Pedialyte®).

Over a few hours, gradually increase the amount of liquids you give, as long as it doesn't worsen your child's condition. If your child vomits, take a break for about 30 minutes and then resume offering the same amount of oral rehydration solution they were tolerating before vomiting.

Every 5 to 10 minutes give children aged:

- 2 to 5 years 30 mL (one ounce)
- 5 to 10 years 60 mL (two ounces)
- Older than 10 years 90 mL (three ounces)

Slowly progress back to a normal diet. Once your child is drinking well, you can try offering them milk or watered-down juice. Slowly introduce these fluids in the same manner as the oral rehydration solution. You can start giving your child food as soon as their appetite returns. Offer smaller meals frequently and gradually increase the portion size. Avoid giving your child caffeine, high-fat foods, or sugary drinks, as these can worsen diarrhea.

**Gastroenteritis in Babies over 6 Months** Continue to feed your baby breastmilk or formula. You might need to breastfeed your baby for shorter durations but more often, or provide smaller amounts of formula at more frequent intervals. If your baby refuses to breastfeed or take formula, you can offer them 5 mL of oral rehydration solution every few minutes.

Go to the Emergency Department if your child: • Has bloody diarrhea or blood in their vomit • Has green vomit (yellow is okay) • Has severe or concerning abdominal (belly) pain • Is unusually sleepy or difficult to wake up • Has a fever for more than five days • Is inconsolable, even when not vomiting • Has less than three urinations in 24 hours • Is unable to keep any liquids down.

As a parent or guardian, you know your child best. IWK's Emergency Department is always here for you. Here are some examples to help you decide if your child is in need of emergency care:

## **Emergency:**

- Fever in infants less than 3 months old; children with immune system problems or complex chronic health problems; child is very sleepy or difficult to wake despite fever medicine
- Breathing problems including respiratory distress (working hard to breathe, breathing faster than normal, pale skin, whiteish or blue lips); asthma or wheezing not responding to usual puffers
- Vomiting or diarrhea in infants less than 3 months, child with repeated vomiting and unable to keep any liquids down for more than 8 hours, vomiting or diarrhea containing large amount of blood, signs of dehydration with dry mouth or no urine more than 8 hours
- Injuries such as:
  - head injury with severe headache, loss of consciousness (passing out), confusion or repeated vomiting
  - cuts that may need stitches, bleeding that won't stop
  - burns that blister and are larger than a Loonie
  - injury to arm or leg causing large swelling or inability to use the limb, obviously broken or dislocated bones
  - eye injuries
  - injury causing chest or stomach pain.
- Rash with fever that looks like tiny or expanding bruises
- Sudden weakness or difficulty talking
- Severe abdominal pain

## Not an emergency:

- Fever in healthy and vaccinated babies and children who appear generally well and playful when the fever is down with ibuprofen (Advil®, Motrin®) or acetaminophen (Tylenol®, Tempra®). Most fever in children is due to viral infection and lasts 3-5 days
- Symptoms of the 'common cold' including nasal congestion and cough (even if it interrupts sleep), mild asthma or wheezing that responds to usual puffers
- Vomiting or diarrhea less than 3-4 times a day if child is peeing well; ongoing diarrhea from the 'stomach flu' can last for up to two weeks.
- Injuries such as:
  - minor head injuries (with no loss of consciousness, no confusion and no vomiting)
  - scrapes and bruises where the injured part can still be used
  - Sprained ankle if child is still able to walk, even if limping
- Recurring rashes or skin problems; rashes with cough and cold symptoms if the child looks well, mild hives without difficulty breathing or throat/ tongue swelling.