

Acute Abdominal Pain Advice Sheet

Advice for parents / carers

December 2016
Kent, Surrey & Sussex
Version



Name of Child Age Date / Time advice given.....

Further advice / Follow up

Name of Professional..... Signature of Professional.....

How is your child? (traffic light advice)



Red

If your child has abdominal pain and also is/has:

- Become unresponsive or increasingly drowsy
- Excruciating pain despite pain killers (See Self Care section overleaf)
- Testicular pain
- Bright green vomit
- A blotchy non-blanching rash (see the 'Glass Test' overleaf)
- Breathing fast or has difficulty breathing
- Cold hands and feet with mottled skin but no fever
- RAPIDLY WORSENING flu-like symptoms with diarrhoea and / or vomiting especially in older children and young people

You need urgent help
please phone 999 or go to the nearest Hospital Emergency (A&E) Department



Amber

If your child has abdominal pain and also is/has:

- Increased thirstiness
- Weeing more or less than normal
- Pain not controlled by regular painkillers
- A swollen tummy
- Yellow skin or eyes
- Blood in your child's poo or wee
- Not being as active or mobile as usual
- Weight loss
- Blood-stained vomit
- A fever with any of the other symptoms listed here or lasts more than 48 hours with none of the above

You need to contact a doctor or nurse today
Please ring your GP surgery or call NHS 111 – dial 111



Green

If your child has abdominal pain and also is/has:

- Alert and interacts with you
- Diarrhoea & vomiting but NO Red or Amber signs (as above). Most children with Diarrhoea and / or Vomiting can be safely managed at home
- Pain associated with periods in a girl
- Recurrent constipation

For all the above, please see advice overleaf.

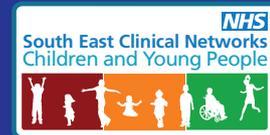
Self care
Using the advice overleaf you can provide the care your child needs at home

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Kent Surrey Sussex
Academic Health Science
Network
Patient
Safety
Collaborative

How can I look after my child?

Self Care: should include ensuring your child has regular food and drink (clear fluids) and regular pain relief. Paracetamol / ibuprofen should be given as per manufacturers' instructions. If concerned, follow traffic light advice overleaf.

Stomach cramps - Your child may have stomach cramps; if simple painkillers do not help please seek further advice.

Diarrhoea and vomiting - If your child has abdominal pain with diarrhoea and vomiting:

- How long has your child been ill? Diarrhoea can often last between 5 – 7 days and stops within 2 weeks. Vomiting does usually not last for more than 3 days. If your child continues to be ill longer than these periods, seek advice.
- Continue to offer your child their usual feeds, including breast or other milk feeds.
- Encourage your child to drink plenty of fluids - little and often. Water is not enough and ideally Oral Rehydration Solution (ORS) is best. ORS eg. Dioralyte can be prescribed by your general practice or can be purchased over the counter at large supermarkets and pharmacies and can help prevent dehydration from occurring. It is also used to treat children who have become dehydrated.
- Mixing the contents of the ORS sachet in dilute squash (not "sugar-free" squash) instead of water may improve the taste.
- Do not worry if your child is not interested in solid food, but offer food or feed when hungry. It is advisable not to give fizzy drinks and / or fruit juices as they can make diarrhoea worse.
- **Hand washing is the best way to stop diarrhoea and / or vomiting (gastroenteritis) spreading.**

Period pain – Further information is available at NHS Choices: <http://www.nhs.uk/conditions/Periods-painful/Pages/Introduction.aspx>

Recurrent constipation - Further information is available at NHS Choices: How to treat your child's constipation? <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/constipation-and-soiling.aspx> or <http://www.nhs.uk/Conditions/Constipation/Pages/Symptoms.aspx>

The Glass Test

Do the 'glass test' if your child has a rash. Press a glass tumbler firmly against the rash. If you can see the spots through the glass and **they do not fade as you press the glass onto the skin** then this is called a 'non-blanching rash'. If you see this type of rash, seek medical advice immediately. The rash is harder to see on dark skin so check paler areas, such as palms of the hands, soles of the feet and tummy.

(Photo courtesy of the Meningitis Research Foundation 2013)



This guidance is written
in the following context:

This document was arrived at after careful consideration of the evidence available including but not exclusively NICE, SIGN, EBM data and NHS evidence, as applicable. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient in consultation with the patient and / or carer.