



## Child Gastroenteritis: Spot Dehydration and Choose Care in Singapore

### Description

For a child with gastroenteritis, give small, frequent sips and track urine, drinking and alertness.

Seek urgent assessment if the child cannot tolerate small amounts of fluid for more than six hours, has no urine or wet nappy for eight to 12 hours, blood or bile in vomit, blood in stool, severe pain or unusual drowsiness.

### Track function, not only stool count

The most useful home observations are whether the child can drink, pass urine, stay alert and keep some fluid down. Write the time of each vomit, drink and urine so deterioration is visible. ([HealthHub childhood gastroenteritis guide](#))

Large drinks can trigger more vomiting. Use frequent small sips of an appropriate oral rehydration fluid and increase gradually if tolerated. Ask a pharmacist or doctor about the right fluid for the child's age and condition.

#### Situation

Child is alert, drinking and urinating  
Repeated vomiting but can take tiny sips  
No urine for 8 to 12 hours or cannot drink for over 6 hours  
Blood, bile, severe pain, breathing trouble or hard to wake

#### What changes

Use small frequent fluids and monitor closely  
Slow the volume and contact a doctor  
Seek urgent medical assessment  
Use emergency care; call 995 for life-threatening distress

**Related:** [choose care when fever is also present](#)

### Use the urine window

HealthHub flags no urine or no wet nappy for eight to 12 hours as a reason for urgent assessment. Do not wait for the child to look severely ill once that window is reached. ([HealthHub child emergency guide](#))

Blood in vomit or stool and green bile-stained vomit need medical review. Severe or localised abdominal pain can point beyond simple gastroenteritis. Photograph the colour only if it does not delay care and do not post the image publicly.

**Example:** A four-year-old has diarrhoea but is alert, drinking small amounts and urinating. Home fluids plus a clinic review may be reasonable. If urine stops for eight to 12 hours or the child becomes hard to wake, urgent assessment is needed.

## Choose care by severity

A stable child can often start with a GP or paediatric clinic. Emergency care is for red flags, severe dehydration, altered alertness or rapid deterioration. Call 995 when the child is unresponsive or has life-threatening breathing or circulation signs.

Handwashing, separate towels and careful cleaning reduce spread. Keep the child away from school or childcare according to medical and centre guidance. Do not prepare food for others while actively unwell.

**Related:** [manage another common childhood infection](#)

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