

# **Vomiting and Diarrhea**



# **History**

- Age
- Time of last meal
- Last bowel movement/
- Improvement or worsening with food or activity
- Duration of problem
- Other sick contacts
- Past medical history
- Past surgical history
- Medications
- Menstrual history (pregnancy)
- Travel history
- Bloody emesis / diarrhea

# Signs and Symptoms

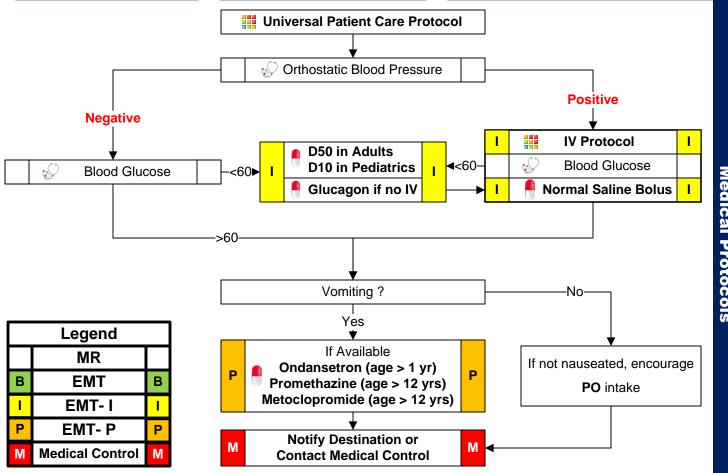
- Pain
- Character of pain (constant, intermittent, sharp, dull, etc.)
- Distention
- Constipation
- Diarrhea
- Anorexia
- Radiation

## Associated symptoms: (Helpful to localize source)

Fever, headache, blurred vision, weakness, malaise, myalgias, cough, headache, dysuria, mental status changes, rash

### **Differential**

- CNS (increased pressure, headache, stroke, CNS lesions, trauma or hemorrhage, vestibular)
- **Mvocardial infarction**
- Drugs (NSAID's, antibiotics, narcotics, chemotherapy)
- GI or Renal disorders
- Diabetic ketoacidosis
- **Gynecologic disease (ovarian cyst. PID)**
- Infections (pneumonia, influenza)
- **Electrolyte abnormalities**
- Food or toxin induced
- **Medication or Substance abuse**
- **Pregnancy**
- **Psychological**



### **Pearls**

- Recommended Exam: Mental Status, Skin, HEENT, Neck, Heart, Lungs, Abdomen, Back, Extremities, Neuro
- The use of metoclopromide (Reglan) may worsen diarrhea and should be avoided in patients with this symptom.
- Choose the lower dose of promethazine (Phenergan) for patients likely to experience sedative effects (e.g., elderly, dibilitated, etc.)
- Document the mental status and vital signs prior to administration of Promethazine (Phenergan).
- Beware of vomiting only in children. Pyloric stenosis, bowel obstruction, and CNS processes (bleeding, tumors, or increased CSF pressures) all often present with vomiting.