**Flow chart for cholera case management**

**Suspected cholera case**

**In areas where a cholera outbreak has not been declared: any patient >2 years presenting with acute watery diarrhea and severe dehydration or dying from acute watery diarrhea**

**In areas where a cholera outbreak is declared: any person presenting with or dying from acute watery diarrhea**

**Step 1**

**Does patient fit case definition?**

**Manage in OPD/IPD**

No

Yes

**Assess for shock or severe dehydration**

**Shock/severe dehydration: (Plan C)**

**Patient has one or more danger sign:**

**• Lethargic or unconscious**

**• Absent or weak pulse**

**• Respiratory distress**

**OR at least 2 of the following:**

**• Not able to drink or drinks poorly**

**• Skin pinch goes back very slowly**

**• Sunken eyes**

**Some dehydration: (Plan B)**

**Patient has at least 2 of the following:**

**• Irritable or restless**

**• Sunken eyes**

**• Rapid pulse**

**• Thirsty (drinks eagerly)**

**• Skin pinch goes back slowly**

**No dehydration: (Plan A)**

**• Awake and alert**

**• Normal pulse**

**• Normal thirst**

**• Eyes not sunken**

**• Skin pinch normal**

No

No

Yes

Yes

Yes

**Give IV Ringer’s lactate (Plan C)**

**(Consider dextrose bolus in paediatric patients for hypoglycemia)**

**<1 year of age: (over 6 hours)**

**1st 60 min: 30ml/kg**

**Next 5 hrs: 70ml/kg**

**Next 5 hrs: 70ml/kg**

**>1 year of age: (over 3 hours)**

**1st 30 min: 30ml/kg**

**Next 2.5 hrs: 70ml/kg**

**Give ORS (Plan B) and observe for 4 hours – see table below**

**OR can also calculate at 75 ml/kg over 4 hours**

**+ ongoing losses (see Plan A)**

**For first 4 hours:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Age** | **<4 months** | **4-11 months** | **12-23 months** | **2-4 years** | **5-14 years** | **>15 years** |
| **Wt. (kg)** | **<5** | **5-7.9** | **8-10.9** | **11-15.9** | **16-29.9** | **>30** |
| **ORS (ml)** | **200-400** | **400-600** | **600-800** | **800-1200** | **1200-2200** | **2200-4000** |

**•Observe for 6 - 12 hours**

**•Continue feeding**

**•Reassess dehydration status (hourly)**

**•In case of frequent vomiting (>3 times in 1 hour): Treat with IV fluid**

**•**

**For first 4 hours:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Age** | **<2 years** | **2-9 years** | **>10 years** |
| **ORS (ml)** | **50-100** | **100-200** | **As much as wanted** |

**•Observe for 6 - 12 hours**

**•Continue feeding**

**•Reassess dehydration status (hourly)**

**•In case of frequent vomiting (>3 times in 1 hour): Treat with IV fluid**

**•**

**Give ORS (Plan A) – see table below**

**Observe in observation or Plan A area for 4 hours**

**Reassess hydration status**

**•Awake AND**

**• Awake AND**

**• Able to drink AND**

**• Improved pulse strength**

**• Severe dehydration**

**OR**

**• Severe vomiting**

|  |  |  |
| --- | --- | --- |
|  | **First-line** | **Alternative** |
| **Adults (including pregnant women)** | **doxycycline 300 mg as a single dose** | **azithromycin PO 1g as a single dose** |
| **Children < 12 years old** | **doxycycline 2-4 mg/kg single dose** | **azithromycin PO 20mg/kg single dose** |

**Antibiotics for severe dehydration cases ONLY**

**Reassess hydration status**

**•Awake AND**

**•Able to drink AND**

**•Improved pulse strength**

Yes

**Consider discharge if:**

**• Has no signs of dehydration**

**• Is able to take ORS without vomiting**

**• Has no watery stools for 4 hours**

**• Is able to walk without assistance**

**• Is passing urine**

Yes

Reassess frequently

(At least every hour)

Yes

Reassess frequently (Every 15-30 min)