Criteria for children in whom CVS is being considered:
- At least 5 attacks over any interval, a minimum of 3 attacks over a 6-month period.
- Episodic attacks of intense nausea and vomiting lasting from 1 hour to 10 days and occurring at least 1 week apart.
- Stereotypical in the individual patient.
- Vomiting during attack occurs at least 4 times/hour for at least 1 hour.
- A return to baseline health episodes.

Electrolytes (Na⁺, K⁺, Cr, HCO₃⁻), glucose, BUN, and creatinine.

U/S series to evaluate for malrotation.

Attacks with presence of:
- Bilious emesis
- Severe abdominal pain or tenderness
- Hematemesis

All attacks precipitated by:
- Fasting
- Intercurrent illness
- High protein meal

Abnormal Neurological exam:
- Severe altered mental status
- Abnormal eye movements
- Papilledema
- Motor asymmetry
- Gait

(*) may not need metabolic evaluation

No findings suggestive of another disorder

Consider at any time:
- Ultrasound of the abdomen & pelvis.
- Amylase & lipase.
- Esophagogastroduodenoscopy.

Consider during an attack:
- ALT/GGT/lipase.
- Amylase.

Obtained at the beginning of attack before IV fluid:
- Glucose.
- Electrolytes for anion gap.
- Urine ketones.
- Lactate.
- Ammonia.
- Serum amino acids.
- Urine organic acids.
- Consider plasma carnitine & acylcarnitine.

Brain MRI

Result of testing explains vomiting

Yes

No

Treat or refer accordingly

Probable CVS

Cyclic Vomiting Syndrome