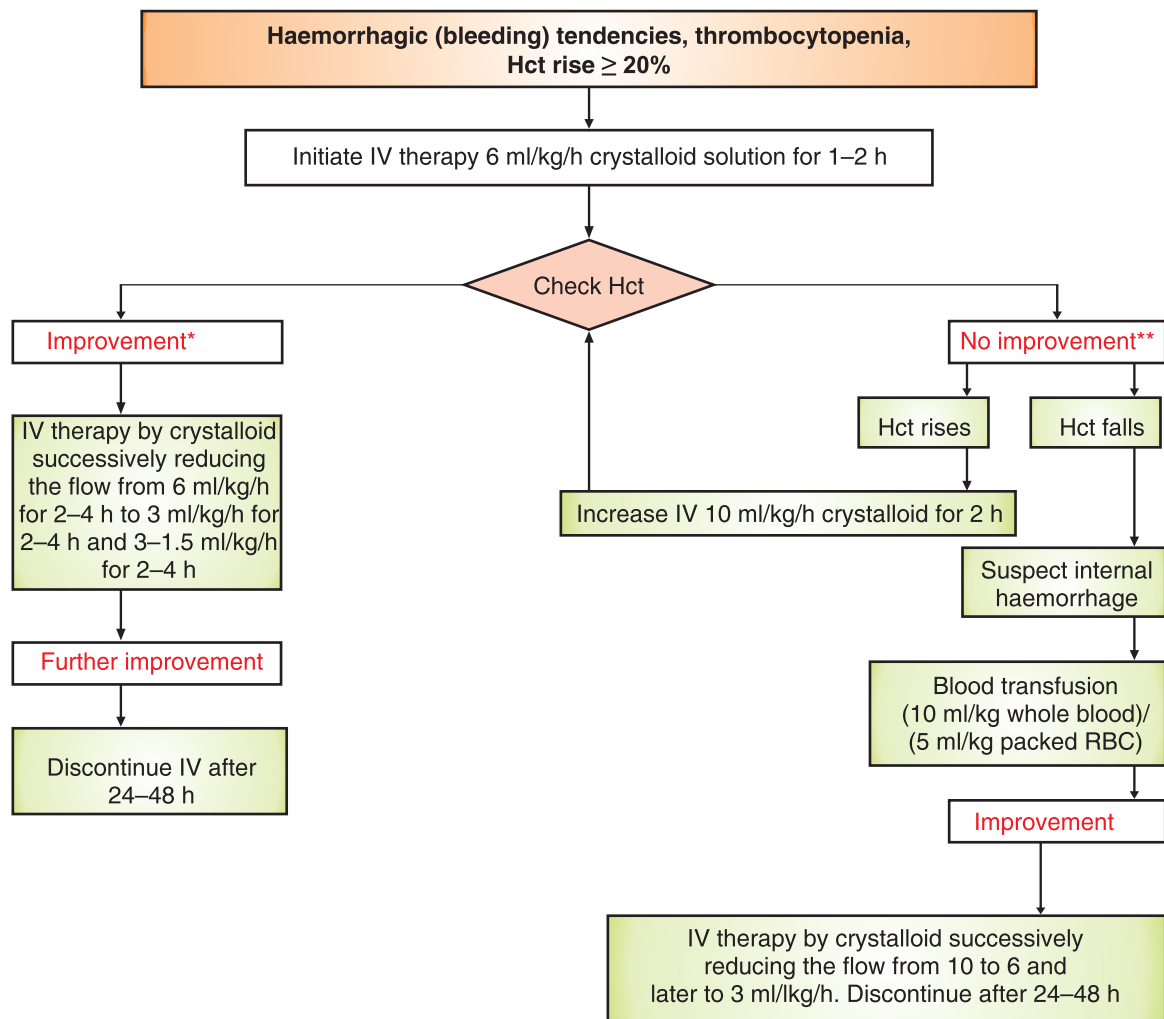


Chart 1. Volume replacement algorithm for patients with moderate Dengue Fever (DHF grades I & II)

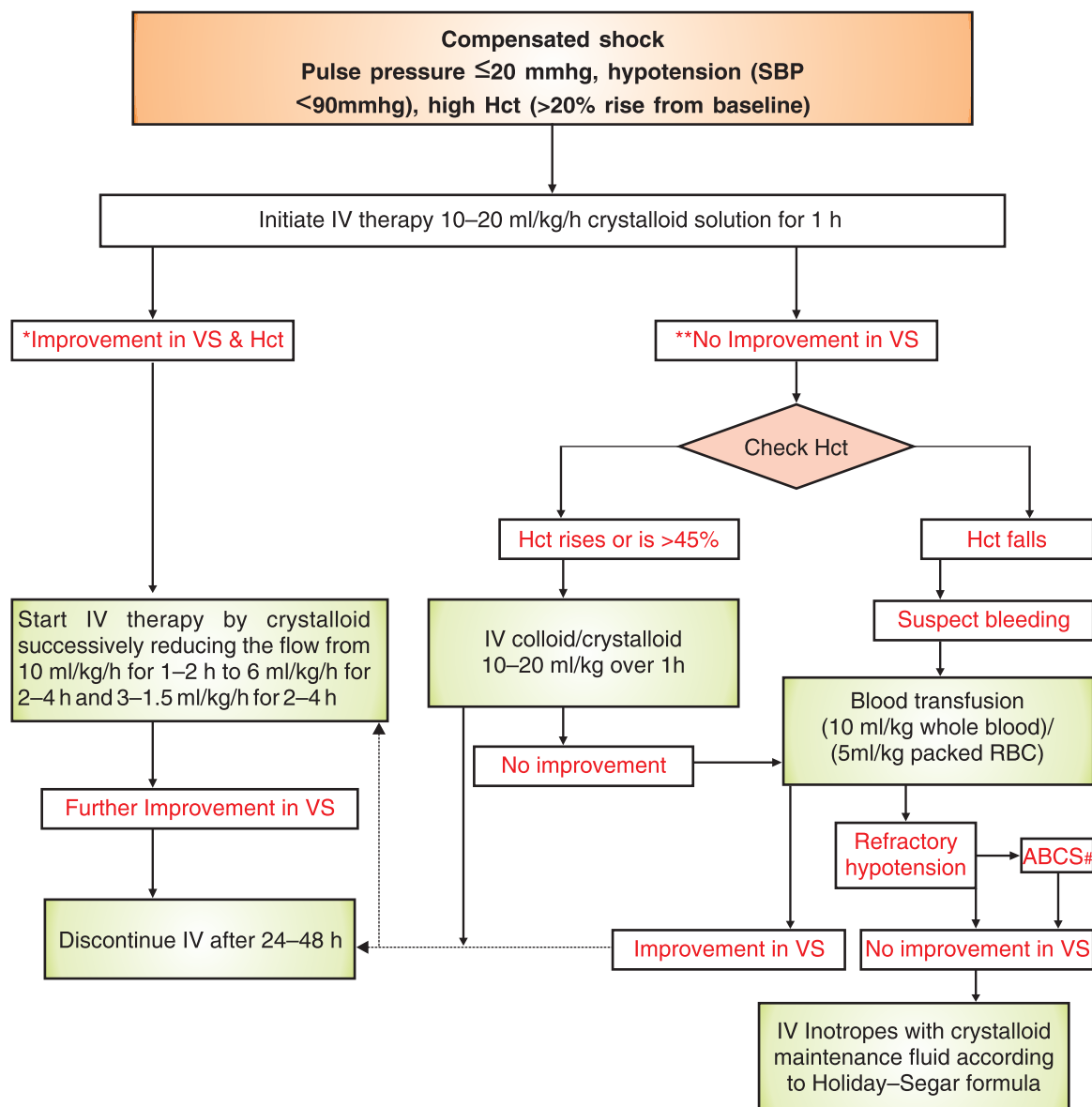


Notes:

*Improvement: Hct falls, pulse rate and blood pressure stable, urine output rises

**No Improvement: Hct or pulse rate rises, pulse pressure falls below 20 mmHg, urine output falls

Chart 2. Volume replacement algorithm for patients with severe Dengue Fever (DHF grade III)



Crystalloid: Normal Saline, ringer lactate

Colloid: Dextran 40/degraded gelatine polymer (polygeline)

ABCS = Acidosis, Bleeding, Calcium (Na++ & K+), Sugar

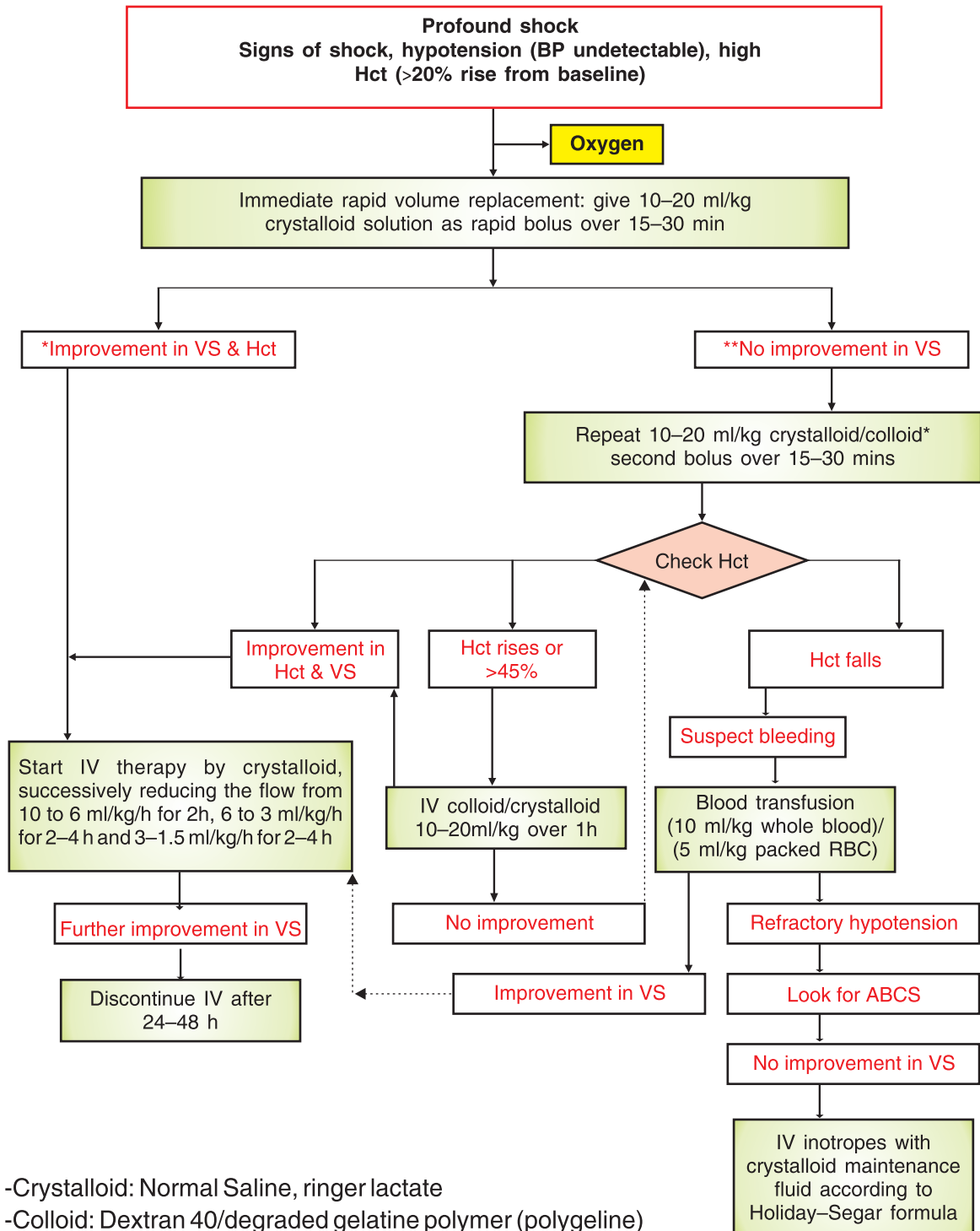
Notes:

*Improvement: Hct falls, pulse rate and blood pressure stable, urine output rises

**No improvement: Hct or pulse rate rises, pulse pressure falls below 20 mmHg, urine output falls

- Unstable vital signs: urine output falls, signs of shock
- In cases of acidosis, hyperosmolar or Ringer's lactate solution should not be used
- Serial platelet and Hct determinations: drop in platelets and rise in Hct are essential for early diagnosis of DHF
- Cases of DHF should be observed every hour for vital signs and urine output

Chart 3. Volume replacement algorithm for patients with severe Dengue Fever (DHF IV (DSS))



- Crystalloid: Normal Saline, ringer lactate
- Colloid: Dextran 40/degraded gelatine polymer (polygeline)
- ABCS = Acidosis, Bleeding, Calcium (Na++ & K+), Sugar

Notes:

*Improvement: Hct falls, pulse rate and blood pressure stable, urine output rises

**No Improvement: Hct or pulse rate rises, pulse pressure falls below 20 mmHg, urine output falls

- Unstable vital signs: Urine output falls, signs of shock
- In cases of acidosis, hyperosmolar or Ringer's lactate solution should not be used
- Serial platelet and Hct determinations: drop in platelets and rise in Hct are essential for early diagnosis of DHF
- Cases of DHF should be observed every hour for vital signs and urine output