OSCE checklist for ORS preparation

An OSCE checklist for ORS preparation covers washing hands, measuring the exact amount of clean water the packet states, mixing the whole packet of oral rehydration salts, giving small frequent sips and teaching the carer the danger signs that need urgent care.

OSCE checklist for ORS preparation: steps to practise

1. Wash your hands with soap and water, introduce yourself to the carer, explain what you will teach, and wash the container, cup and spoon you will use.
2. Check the ORS packet is in date and not damaged, and read the instructions on the packet.
3. Measure the exact amount of clean drinking water the packet says, using a measured container. If safe water is not available, boil it and let it cool first.
4. Pour the whole packet into the water and stir until all of the powder is dissolved.
5. Do not add sugar, salt or anything else, do not boil the mixed solution, and do not use less or more water than stated.
6. Give the solution in small, frequent sips with a cup or spoon, and for a baby use a cup or spoon rather than a bottle. Give more after each loose stool, as the health worker advises.
7. Continue breastfeeding on demand, and continue the child's normal food. Give zinc only if prescribed.
8. If the child vomits, wait about 10 minutes and then continue more slowly.
9. Teach the danger signs that need urgent care: unable to drink or breastfeed, vomiting everything, very sleepy or hard to wake, fits, blood in the stool, drinking poorly, sunken eyes or not passing urine.
10. Explain that the mixed solution should be covered and thrown away after 24 hours, wash your hands, and record what you taught and the amount given.

What candidates commonly forget

- Using the wrong amount of water
- Adding sugar or salt

- Forgetting to stir until dissolved
- Not continuing breastfeeding and food
- Not explaining the danger signs

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Reduced intake and observations in a child. Back to the child health nursing OSCE page: child health nursing OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for ORS preparation?

Wash hands and equipment, check the packet, measure the exact clean water the packet states, dissolve the whole packet, give small frequent sips, continue breastfeeding and food, teach the danger signs and record.

How long can ORS be kept?

WHO guidance says to cover it and throw it away after 24 hours. Check your packet and your policy.

What if the child keeps vomiting?

Wait a short time and try again with smaller sips. If they cannot keep any fluid down, become very sleepy or look worse, they need urgent medical help.

Sources

- WHO: diarrhoeal disease fact sheet

- NICE CG84: diarrhoea and vomiting in children

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.