

Gastrointestinal and Gastroesophageal Reflux (GIGER) Scale for Infants and Toddlers

Intended Use: The GIGER is intended to assess observable symptoms of gastrointestinal distress and gastroesophageal reflux in children under 2 years of age. The GIGER is intended to be completed by a caregiver that is familiar with the child's typical behavior. This is most often a parent, but may be another primary caregiver.

Disclosure: The GIGER does not replace a healthcare provider's clinical assessment. The GIGER is also not intended to provide a diagnosis, but instead may provide the healthcare provider with an objective assessment of the child's symptoms in order to facilitate diagnosis and treatment decisions.

Referencing Information:

Please give appropriate credit to the authors when presenting, publishing, or otherwise referencing the GIGER.

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Gastrointestinal and Gastroesophageal Reflux (GIGER) Scale for Infants and Toddlers

Directions: We are interested in learning about your child's gastrointestinal and gastroesophageal reflux symptoms. When filling this out, think about what is typical for your child in the past week. The GIGER is intended for use in children up to 2 years old.

Self-Regulation Abilities							
	5	4	3	2	1	0	
My child...	Never	Almost Never	Sometimes	Often	Almost Always	Always	Score
1. enjoys eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. is calm and relaxed when eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. sleeps well lying flat on his/her back.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. is easy to console when upset (for example, stops crying when held or offered a pacifier).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. eats enough to grow the way he/she should.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. acts hungry before meals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Items below are scored according to the numbers at right.							
	0	1	2	3	4	5	
	Never	Almost Never	Sometimes	Often	Almost Always	Always	Score
7. has trouble sleeping.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. needs to be encouraged to keep eating (such as, by touching or talking).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-Regulation Abilities Subscale Score							

Continue on next page.

Common GI and GER Symptoms							
	0	1	2	3	4	5	
My child...	Never	Almost Never	Sometimes	Often	Almost Always	Always	Score
9. needs to be burped more than once before the end of feeding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. is very gassy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. spits up <u>during</u> feeding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. spits up <u>in between</u> feedings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. throws up <u>in between</u> feedings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. seems uncomfortable after feeding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. gets the hiccups.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. is uncomfortable if laid flat after eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. sounds gurgly or like they need to cough or clear their throat during or after eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. becomes stiff/rigid during or after eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. arches back during or after eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. gets a bloated (big or hard) tummy after eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. gags in between feedings when there is nothing in his/her mouth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. turns red in face, may cry with pooping/stooling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. becomes upset during feeding (whines, cries, gets fussy).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Common GI and GER Symptoms Subscale Score							

Continue on next page.

Compelling GI and GER Symptoms							
	0	1	2	3	4	5	
My child...	Never	Almost Never	Sometimes	Often	Almost Always	Always	Score
24. changes color (for example, turns blue, gray, purple, or dark red).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. stops breathing or struggles to breathe <u>during</u> feedings/mealtime.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. stops breathing or struggles to breathe <u>in between</u> feedings/mealtime.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. has very dark black poop/stools.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. has very light tan or white poop/stools.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. has blood or mucous in poop/stool.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. has blood in their vomit/spit-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. tries to vomit or looks like they are going to vomit, but nothing comes up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. sounds different during or after eating (for example, voice becomes hoarse, high-pitched, or quiet).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. refuses to eat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. has diarrhea.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. coughs or chokes when not eating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. has trouble getting all of their poop/stool out (for example, he/she poops a little at a time or poops, but there is still more inside).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Compelling GI and GER Symptoms Subscale Score							
If you would like to explain any of your answers or provide more information, please do so here:							

GIGER Scale for Infants and Toddlers

SCORING SUMMARY

Scores are assigned to the GIGER items with low scores indicating no problems and high scores indicating more problematic symptoms. In each subscale, there are numbers at the top of the response options, which indicate the score assigned to each response in that subscale. Note that the scores assigned to the responses for the first 6 questions go from 5 to 0, while the scores assigned to responses on all other questions go from 0 to 5.

To calculate the subscale score, add up the scores for each question in that subscale. Copy the subscale scores to the table below. To calculate the total score, add up all the subscale scores.

Subscale	Score
Self-Regulation Abilities	
Common GI and GER Symptoms	
Compelling GI and GER Symptoms	
Total Score	

Notes:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.