

AIM

- Standardize evaluation and management strategies for children with suspected appendicitis
- Optimize resource utilization and timely intervention for children with suspected appendicitis

EXCLUSION CRITERIA

- Age \geq 18 years
- History of appendectomy
- Bloody stools
- Acute pelvic disease (PID, pregnancy)
- Known history of GI disease or immunodeficiency (Chronic abdominal pain, abdominal migraine, cystic fibrosis, inflammatory bowel disease)

Previously healthy child with suspected appendicitis based on any of the following:

- Right lower quadrant pain (or migration of pain to the right lower quadrant), rebound tenderness
- Anorexia, nausea, vomiting
- Fever

WITHOUT Presence of exclusion criteria or suspected alternative cause other than appendicitis

TRIAGE

- Obtain Vital Signs
- Calculate BMI

DIAGNOSTIC STUDIES

- CBC with differential
- CRP
- Urine HCG if \geq 11 years or post-menarchal
- Additional Studies as indicated
 - CMP
 - Lipase
 - Urinalysis

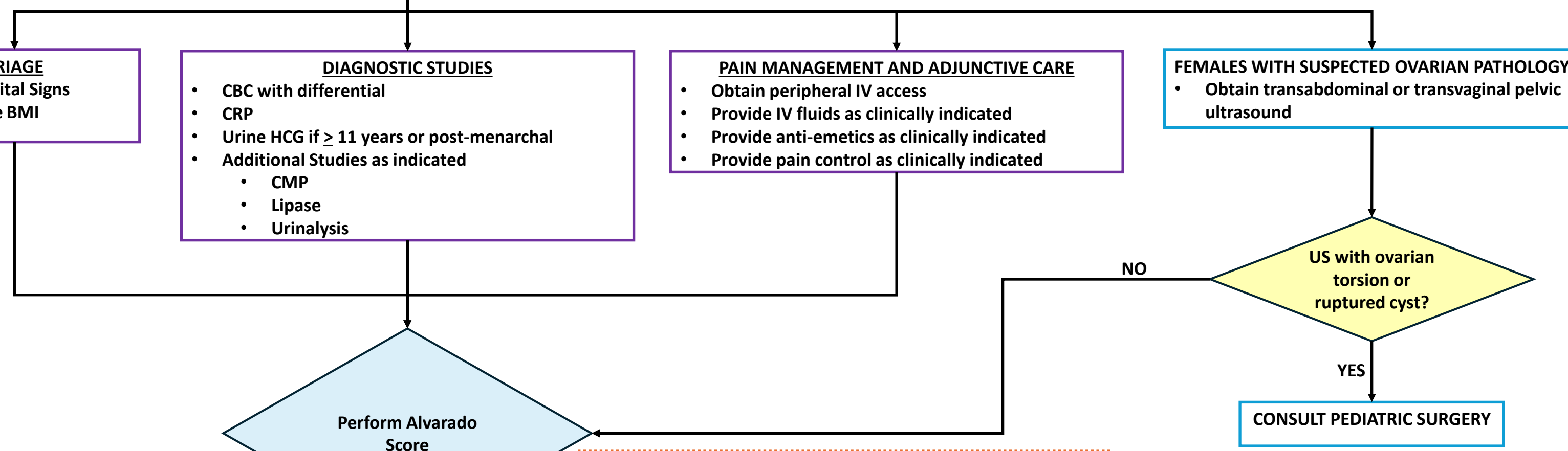
PAIN MANAGEMENT AND ADJUNCTIVE CARE

- Obtain peripheral IV access
- Provide IV fluids as clinically indicated
- Provide anti-emetics as clinically indicated
- Provide pain control as clinically indicated

FEMALES WITH SUSPECTED OVARIAN PATHOLOGY

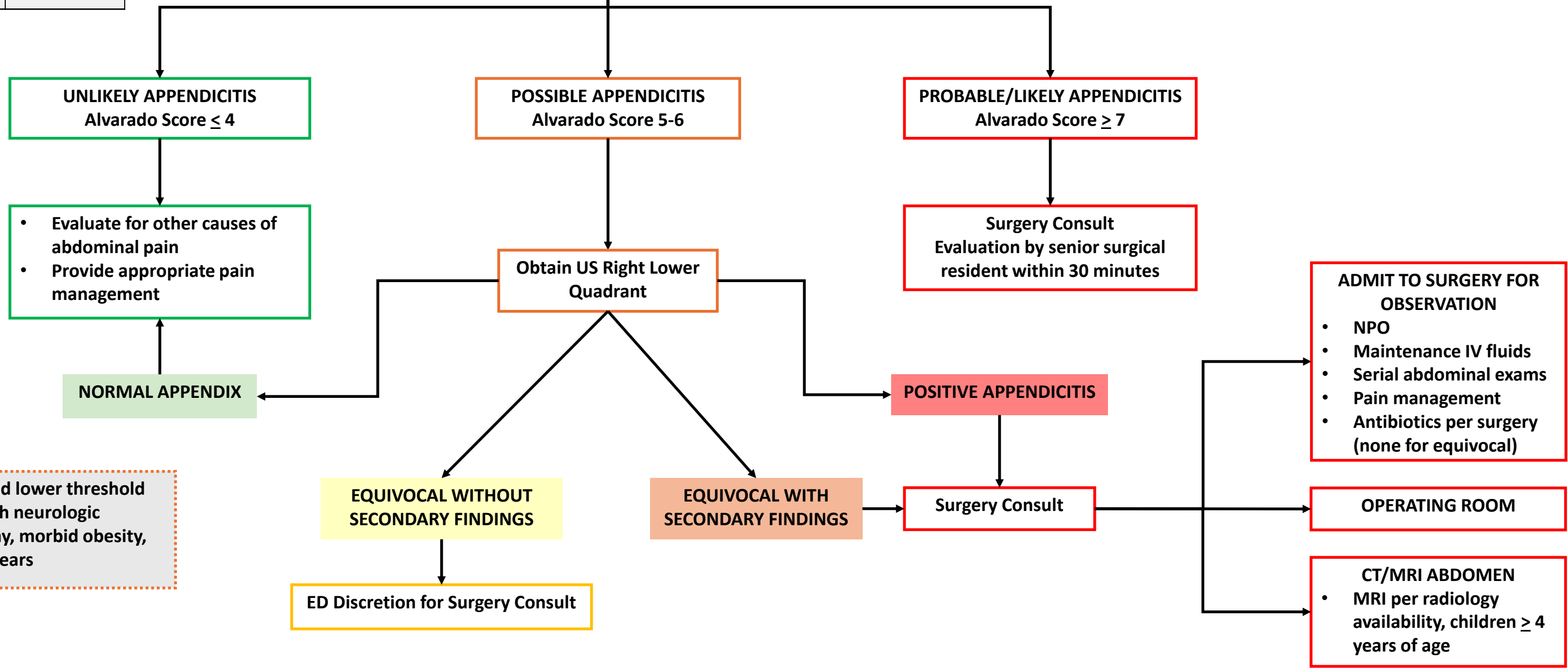
- Obtain transabdominal or transvaginal pelvic ultrasound

ALVARADO SCORE		Point Value
Symptoms	Migration of pain to the RLQ	1
	Anorexia	1
	Nausea or vomiting	1
Signs	RLQ Tenderness	2
	Rebound Tenderness	1
	Elevated temperature (above 37.3°C or 99.1°F)	1
Laboratory Findings	Leukocytosis $>$ 10,000 WBC/ μ L	2
	Leukocyte left shift (neutrophils $>$ 75%)	1
Total Score		



If outside Cardinal Glennon:

- Transfer all patients with score \geq 5 to Cardinal Glennon for evaluation
- Consider transfer in patients with a score of $<$ 5 if clinical concern for appendicitis or other surgical problem persists



Note: Consider higher suspicion and lower threshold for surgery consult for children with neurologic impairment or developmental delay, morbid obesity, immunosuppression, and age $<$ 5 years

GUIDELINE DISCLAIMER

This guideline was developed by the listed authors using publicly available evidence and expert opinion and is approved for clinician use in the SSM Health System by the below committees. The guideline is intended for use by providers treating pediatric patients and may broadly be provided to the majority of patients being treated for the addressed condition(s). The guideline is not meant to replace clinical judgement in individual cases, and care must be taken to address the needs of each individual patient and family to ensure appropriate, timely, and quality care is provided in each clinical encounter. As medicine is always changing and evolving, SSM Health, the listed authors and committees, and any other party involved in the authorship and distribution of this guideline is not responsible for errors, omissions, or outcomes related to clinician use of the guideline

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