

## Evaluation and Management of Magnets in the GI Tract Clinical Practice Guideline

SSMHealth Cardinal Glennon  
Access Center Transfer Line  
**888-229-2424**

### 1. SSMHealth Cardinal Glennon CPG Home

#### 2. Resources

a. Kramer RE, Lerner DG, Lin T, Manfredi M, Shah M, Stephen TC, Gibbons TE, Pall H, Sahn B, McOmber M, Zacur G, Friedlander J, Quiros AJ, Fishman DS, Mamula P. Management of Ingested Foreign Bodies in Children: A Clinical Report of the NASPGHAN Endoscopy Committee. *JPGN*. 2015;60(4):5262-574.

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Approved by SSM Cardinal Glennon Clinical Practice Guidelines Committee  
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#### INCLUSION CRITERIA

Any child < 18 years of age with known or suspected magnet ingestion

#### EXCLUSION CRITERIA

- Other esophageal/GI tract foreign body (see other available CPG's)
- Patients with multi-system trauma
- Foreign body in the airway or nasal passages

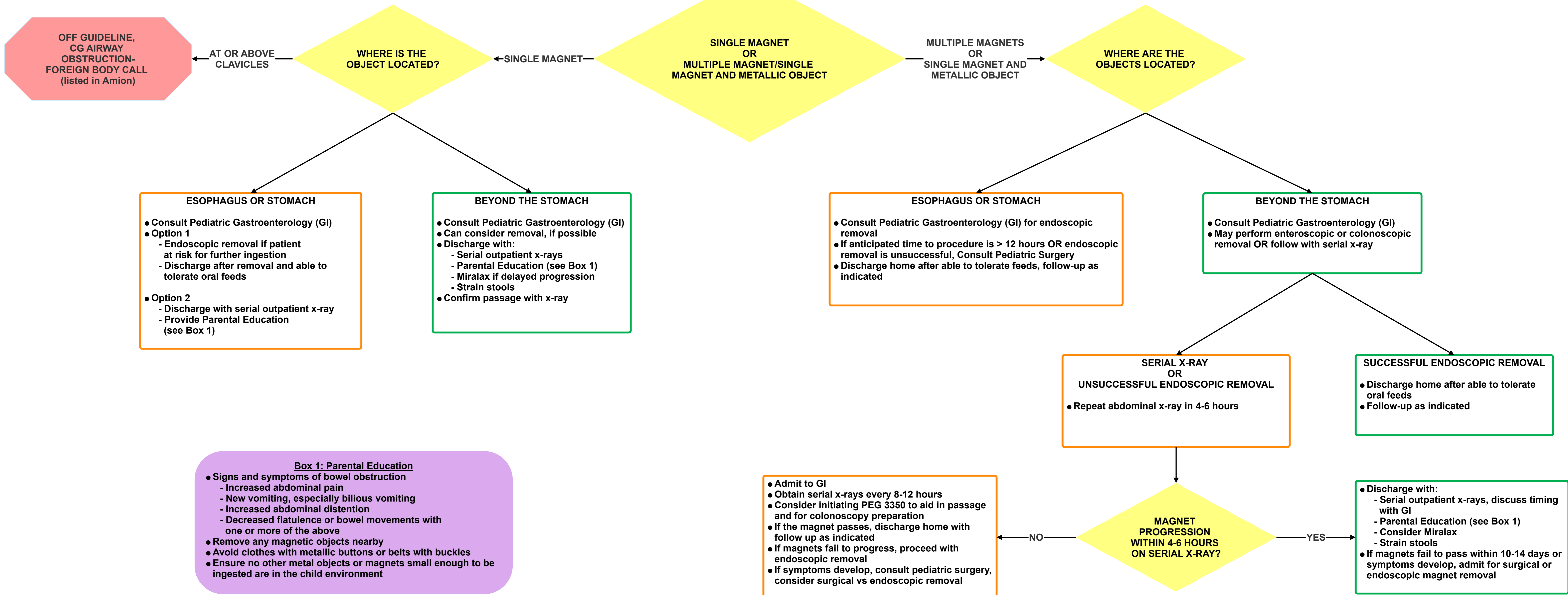
#### INITIAL EVALUATION

- Obtain routine vital signs
- Obtain physical exam and clinical history
  - Known magnet ingestion
  - Unexplained GI symptoms with rare earth magnets in environment
- Obtain CXR and abdominal x-ray; if magnets are present on x-ray, obtain a lateral x-ray

#### DOES THE PATIENT HAVE ANY OF THE FOLLOWING FINDINGS OR SYMPTOMS?

- Drooling
- Severe dysphagia/chest pain
  - Shortness of breath
  - Wheezing
  - Tachypnea
- Retractions or nasal flaring
  - Cyanosis
  - Hematemesis
  - Hematochezia
- Persistent vomiting or signs of obstruction
- Evidence of obstruction or perforation on x-ray

**CONSULT PEDIATRIC SURGERY**  
• Urgent endoscopic or surgical removal indicated



#### Box 1: Parental Education

- Signs and symptoms of bowel obstruction
  - Increased abdominal pain
  - New vomiting, especially bilious vomiting
  - Increased abdominal distention
  - Decreased flatulence or bowel movements with one or more of the above
- Remove any magnetic objects nearby
- Avoid clothes with metallic buttons or belts with buckles
- Ensure no other metal objects or magnets small enough to be ingested are in the child environment