Clinical Guideline
Suspected appendicitis
Pediatric Emergency Medicine

This guideline should not replace clinical judgment.

Consider alternative dx:
- Ovarian/testicular torsion
- PID
- Ectopic pregnancy
- Pyelonephritis
- Intussusception
- Obstruction
- Meckels
- Hepatitis/pancreatitis
- Viral process

Pain control and antiemetics PRN
assess risk of appendicitis:
Maximal tenderness in RLQ and/or
constellation of anorexia, vomiting, fever,
migration of pain

Low risk
- Consider alternative dx
- PO challenge
- Reassess

Risk factors absent/minimal

Moderate/high risk
- NPO
- UA/UPT, CBC w/diff, CRP
- RLQ ultrasound
- Consider pelvic u/s, r/o torsion

Risk factors present

Positive RLQ u/s
- Consult peds surg
- Ceftriaxone (50 mg/kg, max 2000 mg) + metronidazole (30 mg/kg, max 1,500 mg), IV stat x 1
- NS bolus and MIVF

Indeterminant RLQ u/s
- Consider peds surg consult
- Admit obs vs fast MRI or CT

Negative RLQ u/s
- Consider alternative dx
- PO challenge
- Reassess
- Obs CDU vs home with PCP f/u

Consider alternative dx:
- Ovarian/testicular torsion
- PID
- Ectopic pregnancy
- Pyelonephritis
- Intussusception
- Obstruction
- Meckels
- Hepatitis/pancreatitis
- Viral process

Exclude:
If toxic, hemodynamically unstable or rigid abdomen. Treat per sepsis guideline and place emergent peds surgery consult.

Obs CDU vs home with close PCP f/u

The Pediatric Appendicitis Score

<table>
<thead>
<tr>
<th>Item</th>
<th>Score (point)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anorexia</td>
<td>1</td>
</tr>
<tr>
<td>Nausea or vomiting</td>
<td>1</td>
</tr>
<tr>
<td>Migration of pain</td>
<td>1</td>
</tr>
<tr>
<td>Fever &gt;38°C (100.5°F)</td>
<td>1</td>
</tr>
<tr>
<td>Pain with cough, percussion or hopping</td>
<td>2</td>
</tr>
<tr>
<td>Right lower quadrant tenderness</td>
<td>2</td>
</tr>
<tr>
<td>White blood cell count &gt;10,000 cells/microL</td>
<td>1</td>
</tr>
<tr>
<td>Neutrophils plus band forms &gt;2500 cells/microL</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>10 points</td>
</tr>
</tbody>
</table>

Low risk <4, Moderate/high risk ≥4

Suspected Appendicitis Guideline

Executive Summary

Children’s Hospital of Richmond at VCU Pediatric Suspected Appendicitis Workgroup

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Approved (May 2020)

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References


Citation

Title: Pediatric ED Suspected Appendicitis Guideline

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Date: May 2020

Retrieval website: http://www.chrichmond.org/clinical-guideline-suspected-appendicitis

Example: