

# AMBULATORY EVALUATION FOR MIS-C

in the not ill-appearing child

IF CHILD ILL-APPEARING, HYPOTENSIVE OR TOXIC APPEARING, CALL EMS FOR EMERGENT MEDICAL CARE.



Child presenting with fever  $>38.0^{\circ}\text{C}$  or report of subjective fever for  $\geq 3$  DAYS

AND

## TWO OR MORE OF THE FOLLOWING:

- SKIN:** Rash
- GI:** Severe abdominal pain, nausea, vomiting, PO intolerance, diarrhea
- RESPIRATORY:** Cough, shortness of breath, hypoxia
- ENT:** Mucous membrane changes, conjunctivitis
- NEUROLOGY:** Headache, stiff neck, vision changes
- MUSCULOSKELETAL:** Myalgia, arthralgia
- HEMATOLOGY:** Lymphadenopathy



Note: Some individuals may fulfill full or partial criteria for Kawasaki Disease.



AND

No alternative diagnosis

OBTAIN OUTPATIENT SCREENING WORKUP TO EVALUATE FOR POSSIBLE MIS-C: CBC, ESR, CRP

CRP  $\geq 3$  mg/dL or ESR  $\geq 40$

NO

### MIS-C LESS LIKELY

- Discharge with strict return precautions (to return for worsening symptoms)
- Consider other possible etiologies for illness and evaluate appropriately
- Recommend follow-up within 24 hours to monitor clinical progress, recommend return for further workup if clinical picture is worsening

YES



### CALL TO DISCUSS CASE WITH ID/COVID-19 PROVIDER ON CALL

If admission is recommended, call Children's National Emergency Department at 202-476-5433 to discuss with ED physician.



Children's National

Children's National MIS-C Taskforce, 6/19/2020

These guidelines were compiled by a multidisciplinary team at Children's National Hospital, and reflect expert opinion and experience with this emerging disease process.