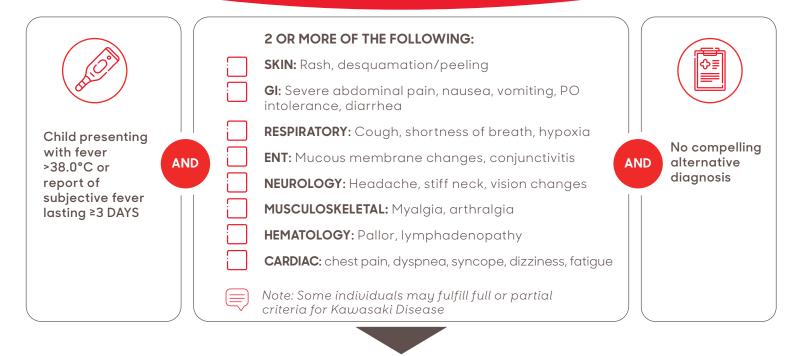
## AMBULATORY EVALUATION FOR MIS-C

in the non-ill-appearing child



**OBTAIN WORKUP TO EVALUATE FOR POSSIBLE MIS-C:** 



CBC, CRP, ESR, CMP, D-Dimer, Ferritin, Troponin, BNP **If possible:** SARS CoV2 PCR



MIS-C LESS LIKELY

• Consider other possible etiologies for illness and evaluate appropriately

NO

- Recommend follow-up within 24 hours to monitor clinical progress
- Discharge with strict return precautions; recommend return for further workup if symptoms persist or worsen



- Discuss case with Children's National Emergency Department via access line 202-476-5433 to discuss with an ED intake specialist.
- Teir 2 labs to be done in consult with Children's National, or on arrival to Children's National: LDH, Fibrinogen, Trigylcerides, PT/PTT/INR, Urinalysis, Urine random protein to creatinine ratio, CXR, EKG, SARS CoV2 Antibody IgG



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