

Intussusception Evaluation and Management- Oakland ED

(C) BCH Emergency Department

Inclusion Criteria

- Pediatric patient in ED
- Clinical concern for intussusception

Exclusion Criteria

- Clinically unstable
- Intra-abdominal mass
- Prior surgical history

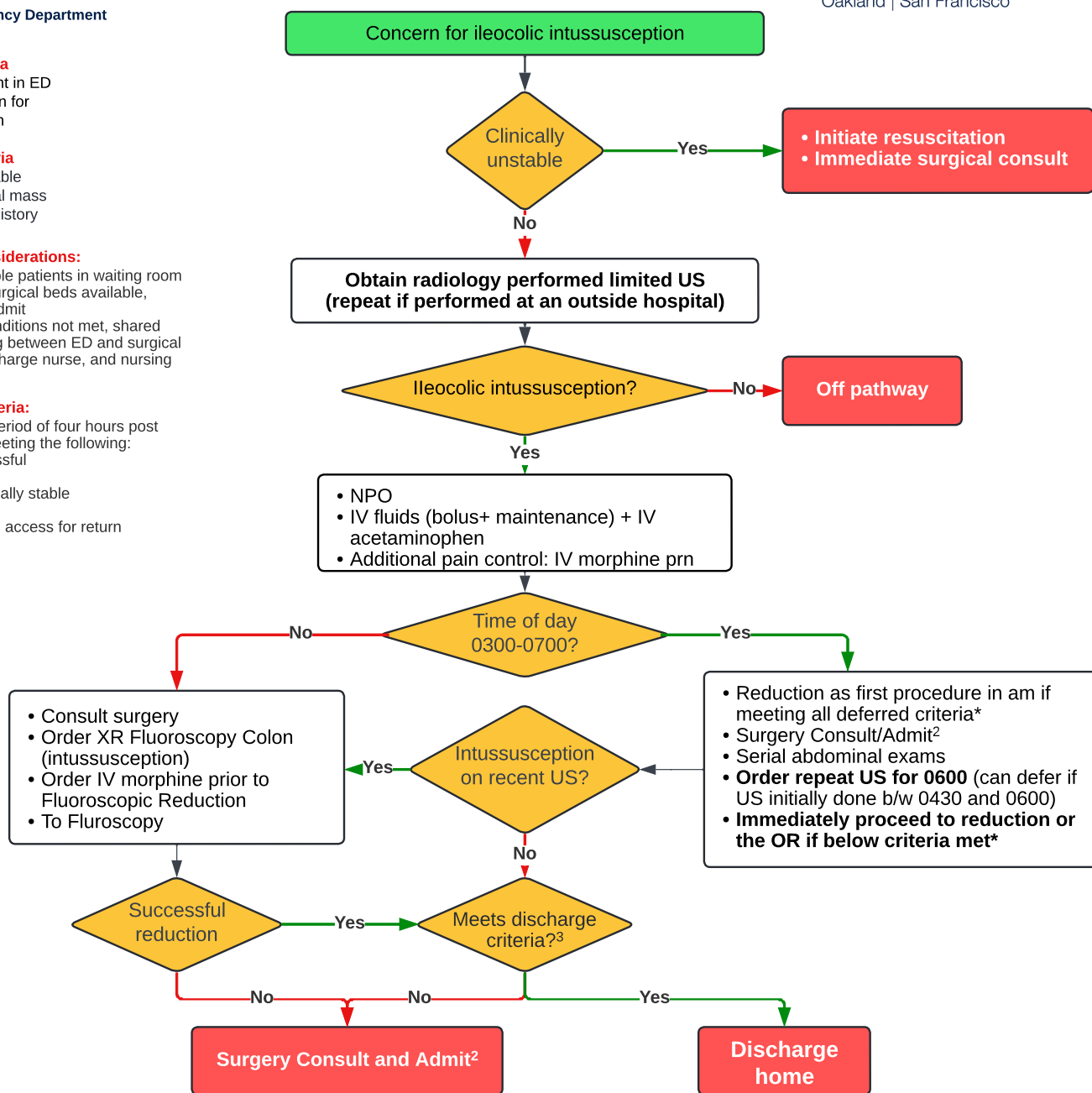
¹ Admission considerations:

- If ED has multiple patients in waiting room and inpatient surgical beds available, preference to admit
- If the above conditions not met, shared decision making between ED and surgical attending, ED charge nurse, and nursing supervisor

² Discharge Criteria:

Observed for a period of four hours post reduction and meeting the following:

- Po trial successful
- Afebrile
- Hemodynamically stable
- Pain-free
- Transportation access for return

***Radiologic/surgical management indications:**

Immediate Surgery	Immediate Reduction	Deferred Reduction
<ul style="list-style-type: none"> • Peritoneal signs • Free Airs • Clinical instability 	<ul style="list-style-type: none"> • US: Interloop fluid, no bowel doppler signal • First confirmed on US >12 hours ago with persistence • Symptom duration >36 hours • Left lower quadrant location 	<ul style="list-style-type: none"> • No US findings suggestive of difficult reduction • Confirmed on US <12 hours • Symptom duration <36 hours
ED or Surgical attending can request radiology presence for reduction at any time based on clinic judgement.		

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Disclaimer: This algorithm serves as a guideline only and should not replace clinical judgment.