

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

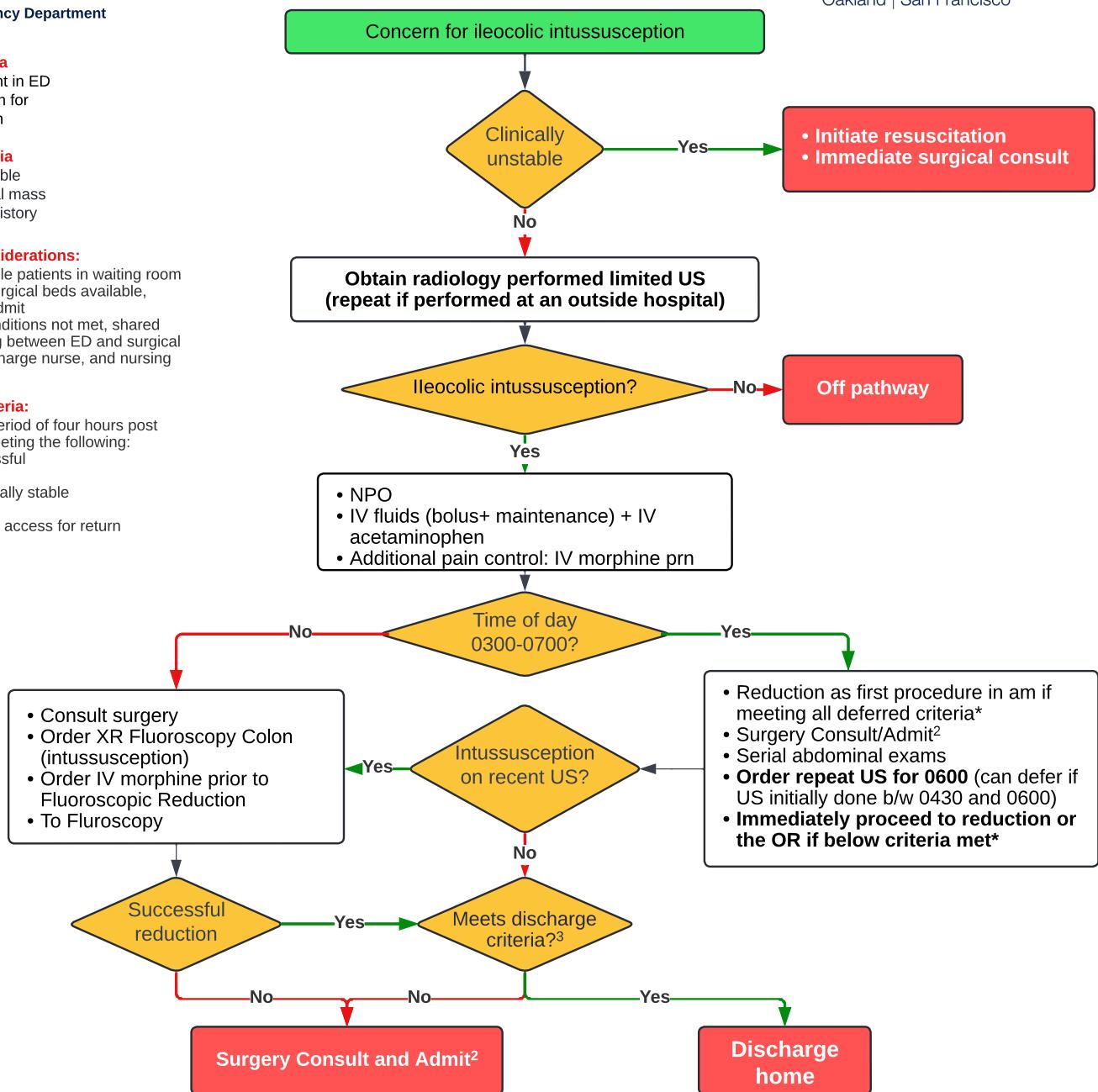
¹Admission considerations:

- 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

²Discharge 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.