

BLANK CHILDREN'S HOSPITAL

ED Pathway: Multisystem Inflammatory Syndrome in Children (MIS-C)

Fever ≥3 days AND one or more of the following:
GI symptoms, Rash, Conjunctivitis, Oral changes, Cough, Chest Pain,
Headache/Irritability, Altered Mental Status, Extremity Swelling,
Lymphadenopathy

OR

Fever ≥4days and no obvious source

STABLE

UNSTABLE with signs of shock

- -Initiate fluid resuscitation and sepsis eval/treatment
- -Monitor for signs of cardiac dysfunction
- -Obtain labs to right
- -Early antibiotics if concern for sepsis
- -If concern for DIC add: fibrinogen, coags, d-dimer
- -Other labs if able: LDH, troponin, BNP, CPK, triglycerides
- -Early PICU admission

LABS /TESTS/IMAGING/TREATMENT

| CBC | COVID PCR | ESR |
|---------------|------------------|---------------------|
| CMP | Blood Culture | Lactate |
| CRP | UA/UC | EKG (if chest pain) |
| Procalcitonin | Resp. Film Array | CXR |

- Add pictures of any rash to Epic
- Maintain isolation per protocol

STABLE, without obvious source of infection, but any one of the following labs **ABNORMAL:**

CRP>3

ESR> 40

Procalcitonin >1

Admit to FLOOR

STABLE and labs **NORMAL**

Continue care as usual

Ensure follow-up with PCP within 24 hours

CDC Case Definition for Multisystem Inflammatory Syndrome in Children (MIS-C) (accessed 5/22/20)

- An individual aged <21 years presenting with feverⁱ, laboratory evidence of inflammationⁱⁱ, and evidence of clinically severe illness requiring hospitalization, with multisystem (≥2) organ involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic or neurological); **AND**
- No alternative plausible diagnoses; AND
- Positive for current or recent SARS-CoV-2 infection by RT-PCR, serology, or antigen test; or COVID-19 exposure within the 4 weeks prior to the onset of symptoms

ⁱFever ≥38.0°C for ≥24 hours, or report of subjective fever lasting ≥24 hours

ⁱⁱIncluding, but not limited to, one or more of the following: an elevated C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), fibrinogen, procalcitonin, d-dimer, ferritin, lactic acid dehydrogenase (LDH), or interleukin 6 (IL-6), elevated neutrophils, reduced lymphocytes and low albumin

Additional comments

- Some individuals may fulfill full or partial criteria for Kawasaki disease but should be reported if they meet the case definition for MIS-C
- Consider MIS-C in any pediatric death with evidence of SARS-CoV-2 infection