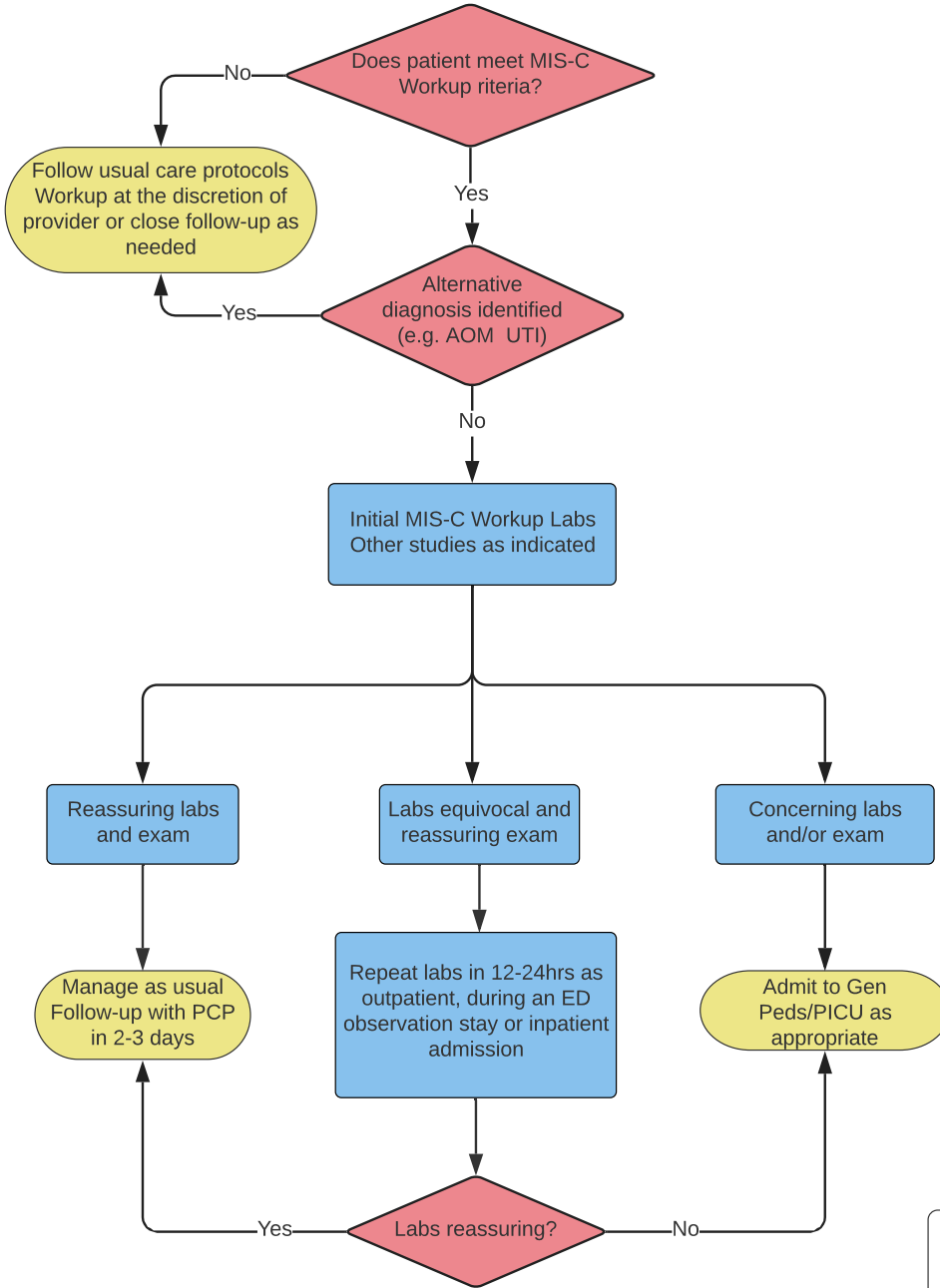


MIS-C ED/Inpatient Evaluation Algorithm

C.S. Mott Children's Hospital
Michigan Medicine
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This algorithm is designed to guide the initial evaluation of patients presenting with suspected Multi-system Inflammatory Syndrome in Children (MIS-C). The Initial MIS-C Workup labs are appropriate across the emergency department and inpatient settings. The recommendations here should serve as a supplement to the workup for other illnesses, as indicated, and they assume that ED referral, admission/discharge criteria, and follow-up decisions will also be guided by the patient's clinical condition and alternative diagnoses.



MIS-C Workup Criteria:

Fever ≥ 38.5 C (101.3 F) for 3 days
plus 2 or more of the following:

- Nausea/vomiting, diarrhea, abdominal pain
- Rash
- Conjunctivitis
- Oral mucosal changes
- Cough, shortness of breath, chest pain
- Headache, irritability
- Extremity swelling
- Lymphadenopathy

Consider ordering Initial MIS-C Workup Labs in any febrile patient who requires labwork for other reasons.

Disposition in the presence of an alternate etiology is beyond the scope of this algorithm and may benefit from collaborative discussion.

Initial MIS-C Workup Labs

****ORDER STAT****

CBCPD
Comprehensive Panel
CRP
High Sensitivity Troponin
Ferritin
Plus concurrent workup of alternative diagnoses

Lab Thresholds of Concern:

Albumin <2 g/dL
CRP >10 mg/dL
Absolute Lymphocyte Count <0.5 K/uL
High Sensitivity Troponin >30 pg/mL
Ferritin >350 ng/mL

If Admitting the Patient

Please refer to the MIS-C Overview document for information regarding additional work up, consults and other standardized care for these patients.

Patients should remain in special pathogen precautions as a COVID Person Under Investigation until they have 2 negative COVID-19 swabs, at least 24 hours apart. They do not require negative pressure rooms unless they are likely to undergo aerosol-generating procedures.