Multisystem Inflammatory Syndrome in Children (MIS-C) is a newly recognized inflammatory syndrome presenting in pediatric patients, associated with current or recent SARS-CoV-2 infection. Much is still unknown, but we do know that children present with prolonged or persistent fever and a constellation of variable symptoms, along with many markers of significant inflammation. They are at high risk for cardiovascular collapse. This document accompanies the MIS-C protocol and is designed to be a quick reference guide when initiating evaluation of these patients in the outpatient setting.

**Initial evaluation criteria**

- T ≥ 38.5C for at least 3 days, plus 2 or more concerning signs/symptoms
- No other etiology identified

**Concerning signs and symptoms**

- Persistent fever ≥ 38.5C
- Nausea, vomiting, diarrhea, abdominal pain (may mimic appendicitis)
- Rash
- Conjunctivitis
- Oral mucosal changes
- Headache, irritability
- Cough, shortness of breath
- Sore throat
- Chest pain
- Extremity swelling
- Lymphadenopathy

**Initial lab testing and thresholds of concern:**

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

**Note:** Work-up of alternative diagnoses should be concurrent with initial MIS-C evaluation.

### To order labs:

If patient is being seen at a Michigan Medicine clinic:

- Place STAT order for Initial Labs in MiChart
- Labs are drawn per usual procedures for PUI in clinic

If patient does not have an appointment (eg, telehealth visit or at an outside office):

- Place STAT order for Initial Labs in MiChart, or have patient bring in lab requisition
- Direct patient to own clinic site or one of the lab/clinics below—there is no need to call first
  - When patients arrive, they will be screened at the door.
  - Family should inform the screener: "My child has a fever, and my pediatrician has ordered labs."
  - Clinic staff will take the patient to a respiratory isolation space with appropriate PPE.