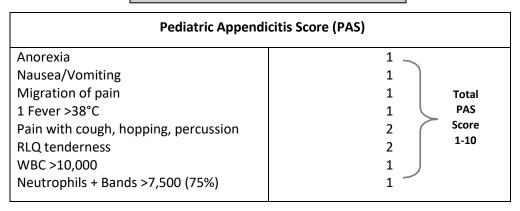
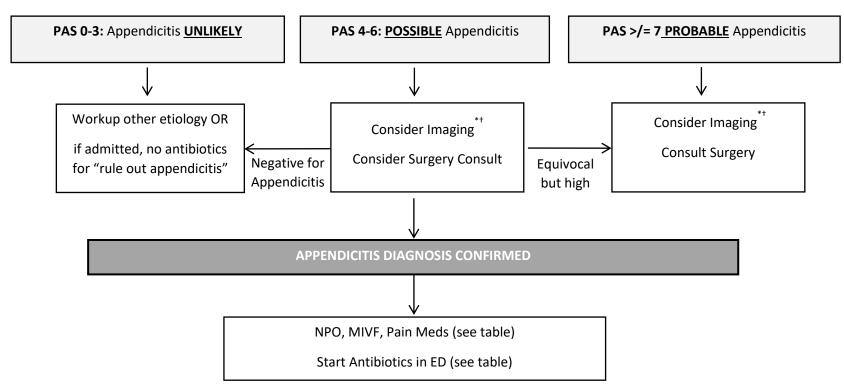


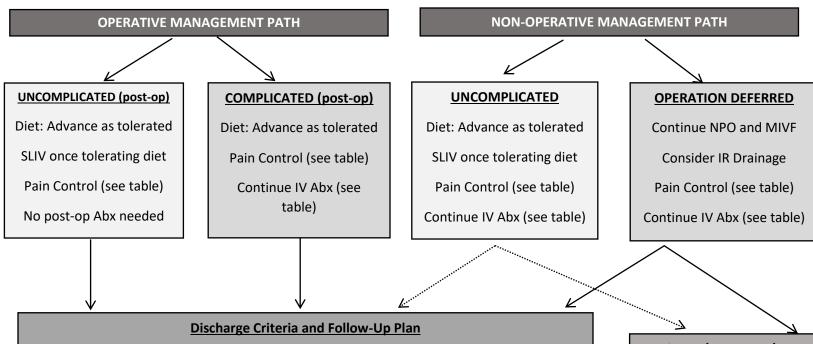
Obtain labs [CBC +/- CRP], chart PAS*





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- * Document Pediatric Appendicitis Score (PAS) in note and put PAS in Radiology order comments.
- † **US first choice. Next preferred exam is MRI if criteria met:** PAS ≥ 4, available in a timely manner (discuss with Radiology via PerfectServe), and patient developmentally appropriate not to require sedation. If BMI>30, consider using **MRI** as first choice. In pediatric patients CT should be used judiciously and reserved for cases when **MRI** criteria are not met and/or alternative diagnosis is suspected.

Afebrile x 24 hrs (T<38C), Tolerating Diet, PO Pain Control, See Antibiotic Tables, Follow-up with Surgery in 2-3 weeks

Postoperative/repeat imaging may not be clinically useful to evaluate for abscess until ~5-7 days post-op.

Persistent/Recurrent/Worsening Symptoms

(fever, pain, etc.)

Consider repeat labs +/- imaging #

Consider operative management

Consider Peds ID consult

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Antibiotic Selection and Duration				
Appendicitis Classification	Inpatient	Outpatient, if needed	Duration	
Uncomplicated		N/A	Peri-operative only	
Complicated	Ceftriaxone plus metronidazole	Amoxicillin-clavulanate OR Cephalexin plus metronidazole	5 days or hospital discharge, whichever is longer	
Non-operative		Cephalexin plus metronidazole		
Severe beta-lactam allergy	Ciprofloxacin plus metronidazole	Ciprofloxacin plus metronidazole	5 days or hospital discharge, whichever is longer	

Intravenous (IV) Antibiotic Dosing				
Antibiotic	Weight-based dose (mg/kg/dose)	Max dose (mg)	Interval (hr)	
Ceftriaxone	50	2000	Q24	
Metronidazole	30	1500	Q24	
Ciprofloxacin	10	400	Q12	

Antibiotic	Weight-based dose (mg/kg/dose)	Max dose (mg)	Interval (hr)
Amoxicillin- clavulanate ¹	25	875 (tablets) 900 (suspension)	Q12
Cephalexin	25	1,000	Q8
Metronidazole	10	500	Q8
Ciprofloxacin	10	500	Q12

Pain Medication Selection and Dosing			
	Pre-Op	Post-Op	
Acetaminophen	15mg/kg/dose PO Q6 scheduled (max 75 mg/kg/day or 4 gm)	15mg/kg/dose PO Q6 scheduled (max 75 mg/kg/day or 4 gm)	
NSAIDs	Try to avoid	- Per surgeon discretion - If able to take PO: ibuprofen 10mg/kg/dose PO Q6 scheduled (max dose 600 mg/dose PO q6) rotated with acetaminophen - If NPO: ketorolac 0.5 mg/kg/dose IV Q6 scheduled (max initial dose 15 mg)	
Opioids	- If able to take PO: hydrocodone-acetaminophen 0.1 mg/kg/dose PO Q4 PRN (max starting dose of 5 mg) - If NPO: morphine 0.05 mg/kg/dose Q4 hours PRN (max starting dose 2 mg) or hydromorphone 0.01 mg/kg/dose IV Q4 PRN (max starting dose 0.2 mg)	 If able to take PO: hydrocodone-acetaminophen 0.1 mg/kg/dose Q4 PRN (max starting dose of 5 mg) If NPO: morphine 0.05 mg/kg/dose Q4 hours PRN (max starting dose 2 mg) or hydromorphone 0.01 mg/kg/dose IV Q4 PRN (max starting dose 0.2 mg) 	

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