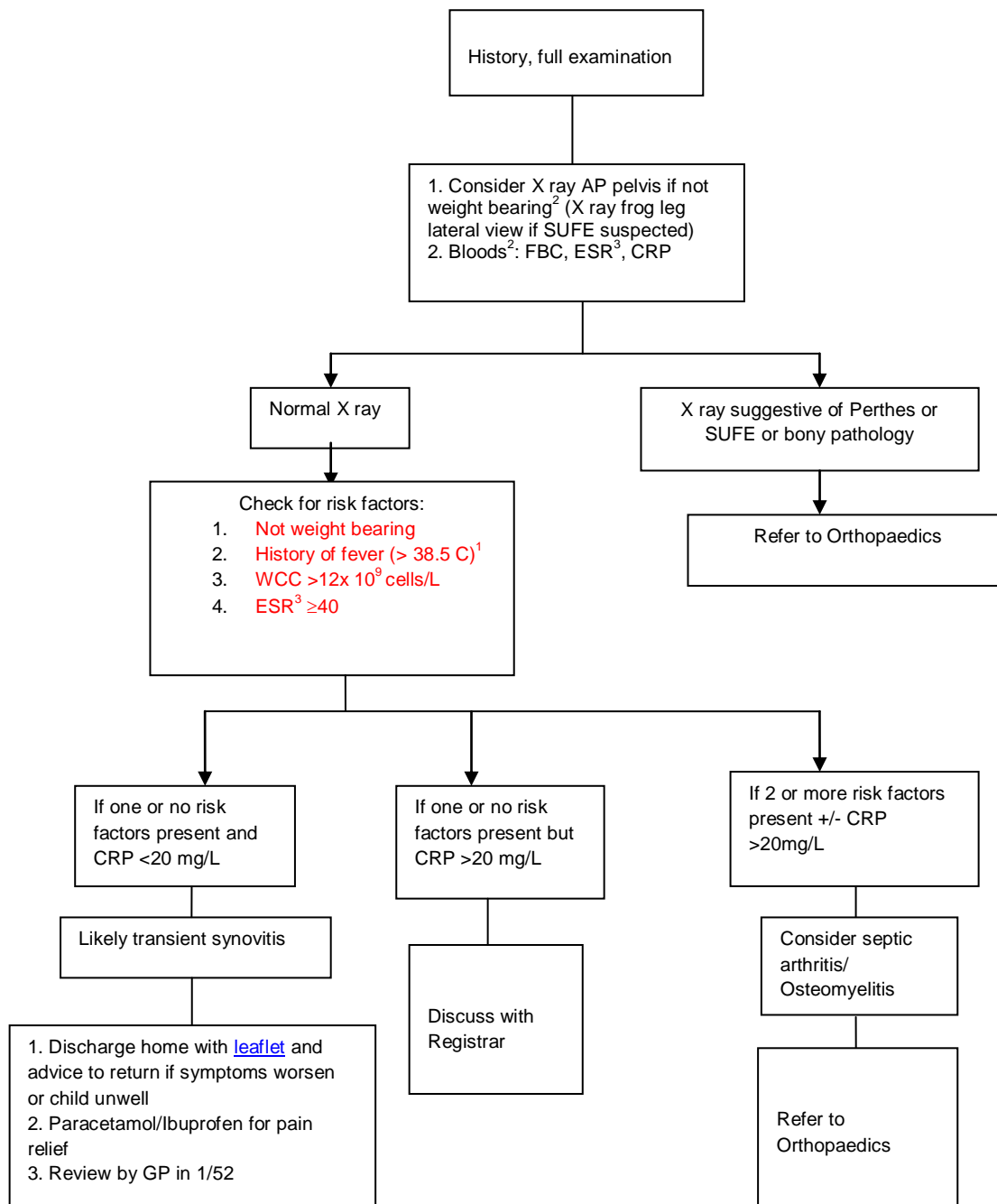


Algorithm for Child presenting with an atraumatic limp



¹For the purpose of the above algorithm, a history of temperature of >38.5 C during the week before the initial presentation (Kocher's criteria) or temp > 38.5 in A&E is considered to be a significant fever.

²In a non toxic, well looking child with mild limp in who transient synovitis is suspected, x rays and bloods are not routinely indicated. Discuss with Registrar if in doubt.

³ESR sample should be taken in a 4 ml adult EDTA tube (1 ml of blood is sufficient in most labs)

Kocher's criteria [3] are highlighted in 'red'. If any of the 'red' features are present, discuss with Registrar. In Kocher et al's study (1999), the probability of having septic arthritis was 3% with one predictor, 40% with two predictors, 93.1% with three predictors and 99.6% with all four predictors. If none of the criteria was positive, the probability of septic arthritis was less than 0.2% [3]. Caird et al in 2006 showed that C-reactive protein level of >20.0 mg/L can be an independent risk factor strongly associated with septic hip arthritis.[4] The clinical prediction rules of Kocher and colleagues are not meant to supplant clinical judgement, but they may be used to help decision making.

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