Pediatric Septic Hip Algorithm

ER Attending suspects septic hip. Labs are ordered (CBC w/diff, ESR, CRP), blood culture, pelvis radiograph, and hip ultrasound completed.

- Positive inflammatory markers and hip effusion on ultrasound: Consult Orthopaedics
  - Orthopaedic resident determines no concern for septic hip: NSAIDS, Observe, Re-examine in the AM
  - Plan to get an MRI to eval for peri-articular abscesses, etc.

- Normal inflammatory markers and no effusion on hip ultrasound: Observe and Discharge
  - Plan to take directly to OR because of 4/4 Kocher criteria (99% likelihood septic)

- Positive inflammatory markers and no effusion on hip ultrasound: Look for other cause of infection
  - Plan to get aspiration: ask Rads Resident to contact the Rads Attending to do the ultrasound guided hip aspiration under sedation in the ER

Positive Gram Stain and/or TNCC >50,000 and/or >90% neutrophils: Ortho Attending On-call will take to OR for I&D

Negative Gram Stain and TNCC <50,000: NSAIDS, Observation because likely Transient Synovitis