



QR code for mobile view

Inclusion criteria:

- Patient < 18 years

Exclusion criteria:

- Hemodynamically unstable
- Concern for sepsis (refer to the [Sepsis Clinical Pathway](#))

Child presents with concerns for intussusception

- Make patient NPO
- Perform abdominal US

If abdominal US already performed at outside facility, repeat US is at the discretion of the radiologist

Was US positive for intussusception?

No

Off pathway

- Complete further assessment for other cause/disease
- Consider repeat US if signs and symptoms recur without alternative diagnosis

Yes

Is intussusception ileocolic or small bowel?

Small bowel

Off pathway

- Small bowel to small bowel intussusception is typically transient
- Continue standard ED evaluation

Ileocolic

- Consult Surgery for awareness
- Ensure IV and monitors are in place

Is patient high risk?

No

- Surgery for plan and disposition
- Off Pathway

Consult Radiology to attempt fluoroscopic (FL)/air enema reduction

- Reattempt Reduction (Surgery & Radiology to discuss)
- Wait 1 - 4 hours between reduction attempts

No

Were there complications or failed to reduce after 3 attempts?

Yes

Management by Surgery

Was reduction successful?

No

Yes

NPO x 3 hours then PO trial liquids (clears, breast milk, or formula) for 1 additional hour

Symptom recurrence?

No

Discharge to home

Instruct patient/family to return to ED if symptoms recur

Intussusception on repeat US?

No

Disposition

- Consider admission based on clinical status
- Consider other etiologies of symptoms

Repeat air enema reduction

Reduction successful?

Yes

Management by Surgery

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Contact: EvidenceBasedPractice@cmh.edu

Link to [synopsis and references](#)