

**PP99 POINT OF CARE
ULTRASOUND (POCUS) IN
DIAGNOSE INTUSSUSCEPTION IN
DISTRICT HOSPITAL: A CASE
REPORT**

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Introduction: Intussusception is a condition where the proximal segment of gastrointestinal tract (GIT) telescope into distal part. It is common in children age six months to 2 years old. It may pose a diagnostic challenge as the classic triad of colicky abdominal pain, vomiting and bloody stool may not present in all cases. Contrast enema is both diagnostic and therapeutic but ultrasound is as good in term of diagnosis. We would like to highlight the use of Point of Care Ultrasound (POCUS) in helping to diagnose intussusception in District Hospital.

Case Report: A two years old boy presented with one day history of severe abdominal pain, vomiting and diarrhea but no bloody stool. He was otherwise a healthy child with no history recent trauma. Clinically he was afebrile, hemodynamically stable with good perfusion. His abdomen was soft, non tender, no palpable mass, bowel sound was heard and normal genitalia. POCUS done reveal a “target” and pseudo-kidney” sign which was later confirmed by formal ultrasound.

Discussion: Intussusception is a common cause acute abdomen in young children and prompt diagnosis is crucial to avoid bowel ischemia and sepsis. As the patient may not always present classically but instead with vague symptoms, clinician should be

vigilant and maintain a high index of suspicion so as not to miss it. Ultrasound now an important assessment tools in Emergency & Trauma (ETD) and it has been proven to be sensitive (96.6-100%) and specific (88-100%) in diagnosing intussusception. Our patient did present with two out of three classic symptoms and with the POCUS findings suggestive of intussusception, we were able to expedite his transfer for further care in Malacca Hospital. Following failed attempt at hydrostatic reduction, he was later transfer to Hospital Tuanku Jaafar under the care of paediatric surgery. He was been discharge well after undergone surgical reduction.

Conclusion: POCUS is an integral part of assessment in ETD. In the hand of trained personnel, it will complement a through history and physical examination in formulating the diagnosis. So always remember: Inspection, Palpation, Percussion, Auscultation and SONOGRAPHY (IPPAS)