

**PP127 RADIOLOGY
TELECONFERENCING WITH
POINT OF CARE ULTRASOUND
FOR PAEDIATRIC
INTUSSUSCEPTION IN
EMERGENCY DEPARTMENT**

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INTRODUCTION

Intussusception is a paediatric surgical emergency. Ultrasound imaging is the gold standard for diagnosing intussusception. This case explores how teleconferencing the radiologist from the emergency room allows for a quick diagnosis and early management.

CASE DESCRIPTION

A 3 year old boy presented to the emergency room with a history of intermittent abdominal pain for 4 days , with vomiting and no bowel movements for 1 day. Examination revealed stable vital signs, soft abdomen and appearing well. Bowel sounds were active with no other associated positive findings. An abdominal x-ray was performed. No abnormalities were detected on the x-ray and subsequently an ultrasound was performed and the Radiologist on call was teleconferenced in via smartphone, with the ultrasound image in view. Ultrasound revealed a 'target sign' over the abdomen.

DISCUSSION

Diagnosing intussusceptions based on clinical examination can be challenging but with imaging, it aids in diagnosis. However, more than 20% of patients with intussusception had negative plain films

but with ultrasound, diagnosing intussusception has 97% sensitivity and specificity in the hands of an experienced sonographer with the classic manifestation of "target sign" on ultrasound. Point-of-care ultrasound for paediatric intussusception in emergency department is challenging. However, with a smartphone ready in the hand, teleconferencing a radiologist leads to a faster diagnosis and improves patient care by leading directly to the treatment.

CONCLUSION

Teleconferencing a radiologist with point-of-care ultrasound in emergency department leads to a quick evaluation and diagnosis, which is paramount to early treatment