Randall Children's Hospital

Co-Management and Referral Guidelines

Evaluating the Child with a Family History of a Clotting Disorder (Excessive Clotting)

Randall Children's Cancer and Blood Disorders Program

A department of Legacy Emanuel Medical Center

Introduction

- The diagnosis of a hypercoaguable condition in a relative sometimes leads to concerns for the possibility of a genetic disorder that could affect the pediatric patient.
- Fortunately, few children are affected by blood clots, and those who have clots usually have serious underlying conditions or risk factors and are admitted to hospital.

Genetic tests are available for many clotting disorders, but this testing is expensive and in many circumstances may not be indicated.

- We recommend that such patients/families be referred to our clinic prior to embarking on laboratory testing, which often raises more questions than it provides answers.
- Our expert staff will provide a thorough and detailed consultation and determine with the patient/family if testing should or should not be performed.

Evaluation and Management

Elicit history regarding affected family member and patient

Underlying conditions or risk factors (presence of central venous catheters, diabetes, Crohn's disease, nephrotic syndrome, sickle cell disease or anemia, chronic inflammation, prolonged immobility), recurrent pulmonary embolus (PE) or deep venous thrombosis (DVT), myocardial infarction (MI) or stroke at ages 30s–40s, miscarriages

Labs to consider

- Rarely needed if child is healthy
- If there is a specific clotting disorder diagnosed in a relative, send the specific assay (Factor V Leiden, Protein C or Protein S, etc.) if oral contraceptives (OCPs) are being considered. Call for phone consultation with any questions, 503-276-9300.

Management while awaiting appointment

- · Avoid smoking, OCPs, dehydration and immobility
- Ambulate hourly during prolonged travel
- Educate regarding signs of deep vein thrombosis or pulmonary embolus (see below)

When to refer

Urgent (today)

- Swollen, warm, painful, plethoric extremity
- Cough with shortness of breath and/or hemoptysis

Within two weeks

• Family history and development of a co-morbidity listed above

Within one month

Heightened anxiety of family

PCP management with phone consult

• Asymptomatic child < 18 years with a family history of clotting

(continued)

Phone: **503-276-9300**Fax: **503-276-9351**



How to refer

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Phone: 503-276-9300 or toll-free 877-KIDS-ONC/877-543-7663

Fax: 503-276-9351

For urgent referrals, call Legacy One Call Consult & Transfer: 1-800-500-9111 to speak with the

on-call pediatric hematologist/oncologist.

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Find this and other co-management/referral guidelines online at: www.legacyhealth.org/randallguidelines

