Randall Children's Hospital at Legacy Emanuel

Randall Children's Northwest Gastroenterology Priority List for GI Conditions

Blood in stool

If recurrent and not only associated with constipation/does not resolve with constipation management, do not need to see infants with classic cow's milk protein allergy.

• New diagnosis celiac disease

Elevated tTG IgA in the setting of normal serum IgA(IgA level > 10-20).

Do not need to refer patients with elevated antigliadin antibodies (in fact we only recommend checking tTG IgA and consider tTG IgG if IgA deficient) – patients should NOT eliminate gluten prior to seeing GI, ideally.

- Concern for inflammatory bowel disease
- Hematemesis
- Concern for malabsorption/intestinal failure
- Poor weight gain/weight loss in the setting of chronic abdominal pain, diarrhea, nausea and vomiting
- Recurrent pancreatitis
- Unexplained liver disease

LFTS persistently elevated with AST and ALT> 80 for > 6 months.

If LFTS persistently elevated for > 6 months we recommend obtaining screening labs to include: A1 AT phenotype, ANA, smooth muscle Ab, anti-LKM Ab, ceruloplasmin (for patients > age 5), chronic hepatitis panel, tTG IgA, thyroid studies, and abdominal ultrasound.

- Cholestasis in infants with DB> 1 or DB > 20% of total bilirubin
- Dysphagia