

Commonly Referred Pediatric GI Conditions

Suggested Pre-Referral Workup

This is a general suggestion of possible testing to confirm a suspected diagnosis. Although referrals will be accepted without the suggested work up being complete, to ensure referrals are processed timely we do require that items listed in the Referral Documentation section be submitted with the initial referral. *In addition to the suggested Pre-Referral Workup in the tables below, it is recommended that the following information is also provided:*

- Referring Physician Name, Office Address and Phone Number
- Patient Demographics and Parent Contact Information
- Reason for Referral with Notes
- Requested department or Physician Name for the referral
- Insurance Information for Patient
- Authorization (when required)

Diagnoses Listed

Urgent Diagnoses

- Melena/ Hematochezia/hematemesis
- Hyperbilirubinemia or jaundice
- Evaluation for PEG placement (ensure this has been discussed with parents)
- Rule out Biliary Atresia, complains of white or grey colored stools
- Elevated liver enzymes
- Ingestion of a foreign body
- Hepatitis

Other Diagnoses

- Abdominal Pain
- Constipation
- Esophageal Reflux
- Failure to Thrive
- Diarrhea
- Vomiting Alone
- Celiac Disease
- Crohn's Disease / Ulcerative Colitis
- Suspected Eosinophilic Esophagitis (EoE)
- Additional Diagnosis

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GI Diagnoses		
Abdominal Pain ICD-10: R10.*		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Abdominal pain persistent or recurrent with routine care measures ✓ Pain associated with weight loss or poor growth ✓ Pain waking patient at night ✓ Pain associated with: <ul style="list-style-type: none"> • Fevers • Vomiting • Diarrhea • GI bleeding ✓ Patient <5 years of age <ul style="list-style-type: none"> • History of previous abdominal surgery or midline congenital abnormalities ✓ Abnormal radiologic studies 	<ul style="list-style-type: none"> ✓ Urine analysis ✓ Stool guaiac (occult blood) ✓ Stool O&P and Giardia antigen ✓ Stool H. pylori specific antigen ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Comprehensive chemistry panel ✓ Serum IgA ✓ Celiac panel ✓ Abdominal ultrasound (optional) 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes
Constipation ICD-10: K59.00		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Failure to stool in the first 24 hours of life ✓ Constipation associated with <ul style="list-style-type: none"> • Recurrent rectal bleeding • Growth failure or poor weight gain • Persistent abdominal pain • Sacral dimple, umbilical hernia, hypotonia, spinal abnormalities or developmental delay ✓ Encopresis ✓ Patient has failed NASPGHAN treatment guidelines 	<ul style="list-style-type: none"> ✓ Stool guaiac (occult blood) ✓ Thyroid function tests if newborn screening results not available ✓ Serum IgA and tissue transglutaminase 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes

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Esophageal Reflux ICD-10:K21.9		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<p><u>Infants <1 year of age</u></p> <ul style="list-style-type: none"> ✓ Patient has failed NASPGHAN treatment guidelines <p><u>>1 year of age</u></p> <ul style="list-style-type: none"> ✓ Unexplained nausea, vomiting or abdominal pain unresponsive to therapy ✓ Persistent nausea, vomiting or abdominal pain associated with weight loss or growth failure ✓ Unexplained apnea, choking, swallowing or feeding problems ✓ Unexplained chronic cough, wheezing, halitosis, hoarseness of voice, dental enamel erosion, recurrent otitis media or sinusitis ✓ Unexplained dysphagia ✓ History of previous abdominal surgery or midline congenital abnormalities 	<ul style="list-style-type: none"> ✓ No additional workup suggested ✓ Urine analysis ✓ Stool guaiac (occult blood) ✓ Stool H. pylori antigen ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Comprehensive chemistry panel 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes
Failure to Thrive ICD-10: R62.50, R62.59		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Growth failure unexplained by <ul style="list-style-type: none"> • Endocrine abnormalities • Constitutional growth ✓ Poor weight gain unresponsive to adequate nutritional intake ✓ Inability to sustain adequate nutritional intake ✓ Inadequate growth or weight gain associated with vomiting, diarrhea, abdominal pain, fevers, arthralgia, aphthous ulcers or perianal lesions ✓ History of previous abdominal surgery or midline congenital abnormalities 	<ul style="list-style-type: none"> ✓ Urine analysis ✓ Stool guaiac (occult blood) ✓ Qualitative fecal fat ✓ Stool reducing substance ✓ Fecal elastase or stool trypsin ✓ Stool leukocytes and lactoferrin ✓ Stool alpha-1 antitrypsin ✓ Stool ova and parasite & Giardia antigen ✓ Complete blood count with differential ✓ Comprehensive chemistry panel ✓ Serum IgA and tissue transglutaminase ✓ T4 and TSH ✓ Sweat chloride test 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes ✓ Parental heights

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Diarrhea ICD-10: R19.7		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Diarrhea unresponsive to dietary manipulations that might include lactose restriction and addition of dietary fiber ✓ Diarrhea associated with: <ul style="list-style-type: none"> • Rectal bleeding • Weight loss or growth failure • Joint pains, rashes or fevers ✓ Diarrhea that awakens patient from a sound sleep at night 	<ul style="list-style-type: none"> ✓ Stool culture and sensitivity including: <ul style="list-style-type: none"> • Yersinia and Campylobacter • Stool O&P and Giardia antigen • Stool for Clostridium difficile toxin • Stool guaiac • Stool leukocytes and lactoferrin • Stool for qualitative fat and reducing substance • Stool alpha-1 antitrypsin ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Comprehensive chemistry panel 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes
Vomiting Alone ICD-10: R11.10		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Persistent nausea and vomiting ✓ Persistent nausea, vomiting or abdominal pain associated with weight loss, growth failure or other symptoms ✓ Vomiting associated with headaches ✓ Recurrent evidence of H. pylori infection ✓ Dysphagia ✓ History of foreign body, caustic ingestion or pills ✓ History of previous abdominal surgery or midline congenital abnormalities 	<ul style="list-style-type: none"> ✓ Urine analysis ✓ Stool guaiac (occult blood) ✓ Stool O&P & Giardia antigen ✓ Stool H. pylori antigen ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Lipase ✓ Comprehensive chemistry panel 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes

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Celiac Disease ICD-10: K90.0		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Abnormal celiac markers or normal markers with low total serum IgA ✓ Unexplained: <ul style="list-style-type: none"> • Growth failure or weight loss • Diarrhea • Abdominal pain ✓ Family history of celiac disease 	<ul style="list-style-type: none"> ✓ Celiac panel including Serum IgA ✓ Stool O&P and Giardia antigen ✓ Stool guaiac (occult blood) ✓ Stool leukocytes and lactoferrin ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Comprehensive chemistry panel 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes ✓ Celiac panel including Serum IgA
Crohn's Disease / Ulcerative Colitis ICD-10: K50.9*		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Anemia, low albumin level, elevated ESR or CRP ✓ Unexplained: <ul style="list-style-type: none"> • Growth failure or weight loss • Diarrhea or rectal bleeding • Vomiting • Abdominal pain ✓ Family history of Crohn's disease or Ulcerative Colitis 	<ul style="list-style-type: none"> ✓ Stool O&P & Giardia antigen ✓ Stool guaiac (occult blood) ✓ Stool leukocytes and lactoferrin ✓ Stool Clostridium difficile toxin ✓ Stool culture and sensitivity including: Yersinia and Campylobacter ✓ Complete blood count with differential ✓ Sedimentation rate & C-reactive protein ✓ Comprehensive chemistry panel 	<ul style="list-style-type: none"> ✓ Endoscopy and pathology reports, if performed ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes
Suspected Eosinophilic Esophagitis (EoE) ICD-10: K20.0		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Feeding problems ✓ Dysphagia ✓ History of food impaction ✓ Persistent vomiting ✓ Persistent reflux symptoms despite medical therapy ✓ Poor appetite ✓ Failure to Thrive 	<ul style="list-style-type: none"> ✓ Complete blood count with differential ✓ Comprehensive chemistry panel ✓ Sedimentation rate & C-reactive protein 	<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes



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Urgent Diagnoses		
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Additional Diagnoses		
When to Refer	Suggested Pre-referral Workup	Referral Documentation Requirements
<ul style="list-style-type: none"> ✓ Hirschsprung's or ano-rectal malformation ✓ Megacolon ✓ Chronic elevation of Liver transaminases ✓ Feeding difficulties ✓ Nonalcoholic fatty liver disease ✓ Chronic pancreatitis ✓ Failed treatment for H. pylori gastritis 		<ul style="list-style-type: none"> ✓ Current growth chart ✓ Laboratory and radiology results ✓ Relevant clinical notes