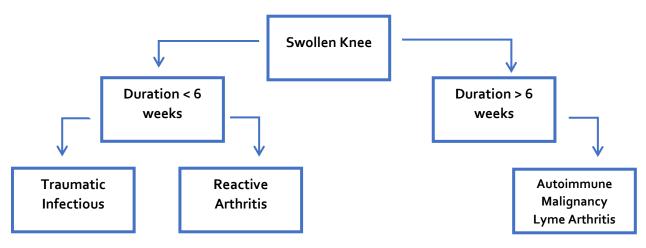
# **Evaluation of a Young Child With Joint Effusion**

## Direct Line to PSV Subspecialists: 703.778.1234

## Extent of Workup is Determined by Duration of Symptoms



## Consideration for Serological Testing:

#### Should you order a Rheumatoid Factor or Cyclic Citrullinated Peptide? No! less than 10% of children with POLYarticular JIA have a positive RF or CCP

## Should you order an ANA?

20% of the population has a positive ANA in absence of rheumatic disease

### Three reasons to order an ANA:

- 1. In a child with suspected lupus based on objective signs/symptoms and baseline labs
- 2. In a child with JIA to assess uveitis risk
- 3. In a child with Raynauds to assess if Raynauds is primary or secondary

## **Ophthalmology Screening Recommendations for Children with JIA**

	Every 3 months for 4 years Every 6 months for 3 years, then yearly
Negative ANA or over 7yo at onset of JIA	Every 6 months for 4 years, then yearly

## Red Flag Signs that JIA is Not JIA

- Systemic signs Fevers, night sweats, weight loss, bloody stools
- Severe joint pain
- Bone pain
- Pain waking patient up at night

Pediatric Health Network

- No thrombocytosis despite elevated ESR
- Anemia of chronic disease



Children's National.