

Background:

Limping or refusal to bear weight is a common complaint among children presenting to Pediatric Emergency Department (PED). It may be challenging to evaluate, especially among toddlers and non verbal children.

RESULTS

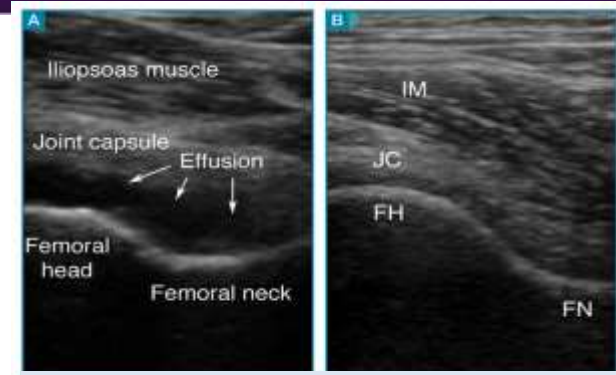
The groups didn't differ in their epidemiologic characteristics or clinical presentation . the POCUS group's ED length of stay (EDLOS) was significantly shorter than the control group. Use of auxiliary tests was reduced in the POCUS group.

Methods:

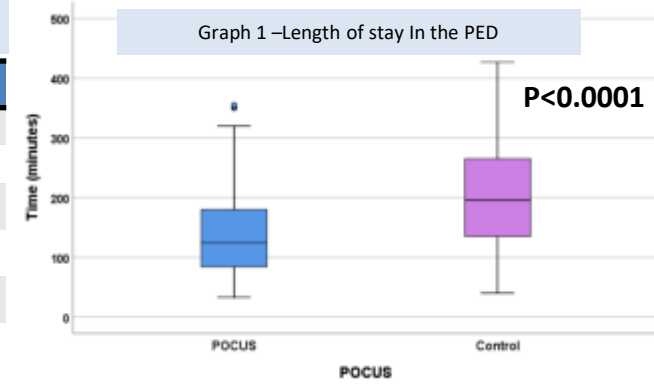
A retrospective study involving children aged 2- 18 years who presented to Meir hospital's PED with a chief complaint of limping between the years 2015-2019. The study group included children who underwent hip POCUS as part of their ED evaluation. The control group included children who underwent evaluation without use of hip POCUS. The primary outcome was total care duration in the PED and the use of additional diagnostic workup.

Table 1 –EDLOS and Use of auxiliary tests among limping children in the ED

	POCUS	CONTROL	P value
	n=220 (%)	n=191 (%)	
EDLOS (min)	157.7	212.8	<0.0001
XR	66 (30%)	86 (45%)	0.002
Blood Sample	74 (33%)	115 (60%)	<0.0001
Formal US	10 (4.5%)	51 (21.5%)	<0.0001
Ortho consultant	13 (5.9%)	134 (70%)	<0.0001



A- Pocus image of hip joint capsule effusion. B-Pocus image of normal hip joint



CONCLUSIONS:

The use of hip POCUS as part of evaluating patients presenting to the PED with the complaint of limping reduces length of stay and streamlines emergency room resources