



# Index of Suspicion

## 1 Fever, Abdominal Pain in a 16-year-old Girl

Tricia Lucin, MD,\* Julie Wood, DO<sup>†</sup>

\*Department of Pediatrics, Nationwide Children's Hospital, Columbus, OH

<sup>†</sup>Department of Pediatrics, Wake Forest University, Winston-Salem, NC

### EDITOR'S NOTE

Beginning with our January 2017 issue, *Pediatrics in Review* each month will publish three additional Index of Suspicion cases. These will be available in their entirety online, but only the Case Presentation for each will be published in the print edition of the journal. We anticipate that the move to online will encourage authors to use more images and videos in their case submissions.

### PRESENTATION

A previously healthy 16-year-old girl is admitted to the hospital for evaluation of fever and abdominal pain. The fever (as high as 104°F [40°C]) began 5 days before admission. She has concurrent nausea, vomiting, abdominal pain, and diarrhea. There is no blood or bile in the vomitus, and stools are without blood or mucus. She has no headache or rash. She has no known sick contacts and is a recent immigrant from Pakistan. Her medical history and family history are unremarkable.

On admission, she appears unwell, but nontoxic. Her vital signs are notable for temperature of 102.6°F (39.2°C), pulse of 92 beats/min, and blood pressure of 111/71 mm Hg. Findings from physical examination are normal except for a tender abdomen without masses or organomegaly.

Initial laboratory evaluation is significant for a low white blood cell count of 3,100/ $\mu$ L ( $3.1 \times 10^9$ /L), a low hemoglobin level of 10.1 g/dL (101 g/L), and a low platelet count of  $77 \times 10^3$ / $\mu$ L ( $77 \times 10^9$ /L). Additionally, her complete metabolic panel shows a low sodium level of 130 mEq/L (130 mmol/L), an elevated aspartate aminotransferase level of 107 U/L (1.79  $\mu$ kat/L), and an elevated alanine aminotransferase level of 116 U/L (1.94  $\mu$ kat/L), with normal bilirubin and alkaline phosphatase levels. Results of urinalysis are normal. Findings from abdominal ultrasonography and radiography are also normal. Further laboratory investigations reveal the diagnosis.

*The Case Discussion and Suggested Readings appear with the online version of this article at <http://pedsinreview.aappublications.org/content/38/3/139>.*

### EDITOR'S NOTE

We invite readers to contribute Index of Suspicion cases at: *Submit and Track My Manuscript*.

**AUTHOR DISCLOSURE** Drs Lucin and Wood have disclosed no financial relationships relevant to this article. This commentary does not contain a discussion of an unapproved/investigative use of a commercial product/device.

## Case 1: Fever, Abdominal Pain in a 16-year-old Girl

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The online version of this article, along with updated information and services, is located on the World Wide Web at:

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