

New paediatric case, Sep
2023

- C/P: Fever of unknown origin, arthralgia and Rash.
- DDx: Post strep infection Erythema Nodosum, Serum sickness, IBD, rule out Malignancy

GI:

While it is rare to present with an extraintestinal manifestation alone it has been reported in the literature. However elevated fecal calprotectin is not diagnostic for IBD but suggests ongoing gut inflammation but may also reflect a part of his ongoing systemic inflammation.

Physical Exam

Gen: no acute distress, looks sad , lying in bed

HEENT: , no ulcers or vesicles, anicteric sclera. No neck stiffness. Posterior lymphadenopathy small 1.5 cm on the L

Chest: normal breath sounds bilaterally, no crackles, no wheezes

CV: S1S2 heard without murmur.

Abd: Soft, lax, mild tenderness over evolving redness in the periumbilical area to palpation, no anal fissures or ulcers on external exam

Skin: Multiple large painful/tender nodules that are erythematous some with central discoloration coalescing blanchable, over extremities and abdomen/back and buttocks. Sparing palm, one isolated nodule on heel.

- Lab Results

MRSA (Nares) Positive

wbc 10.6 > 7.5 (21/08) > 13

Hgb 10.6 > 11.2 > 9.6

MCV 81

Plt 504 > 317 > 414

ESR 61 > 48 > 47 > 53 > 47

Retic 25.9, retic % 0.6

CMP acceptable

G6PD normal

LDH 258

CK 37

CRP 142 > 291.9 > 269.5

Calprotectin 86 (high) > 354

Ferritin 784 > 764

ANCA/ANA neg

C3 2

C4 0.6

ASO 726 > 953

Quantiferon TB gold: neg

brucella, CMV, EBV, Measles, Parvovirus, Rubella: neg

urine, blood, throat cx: neg

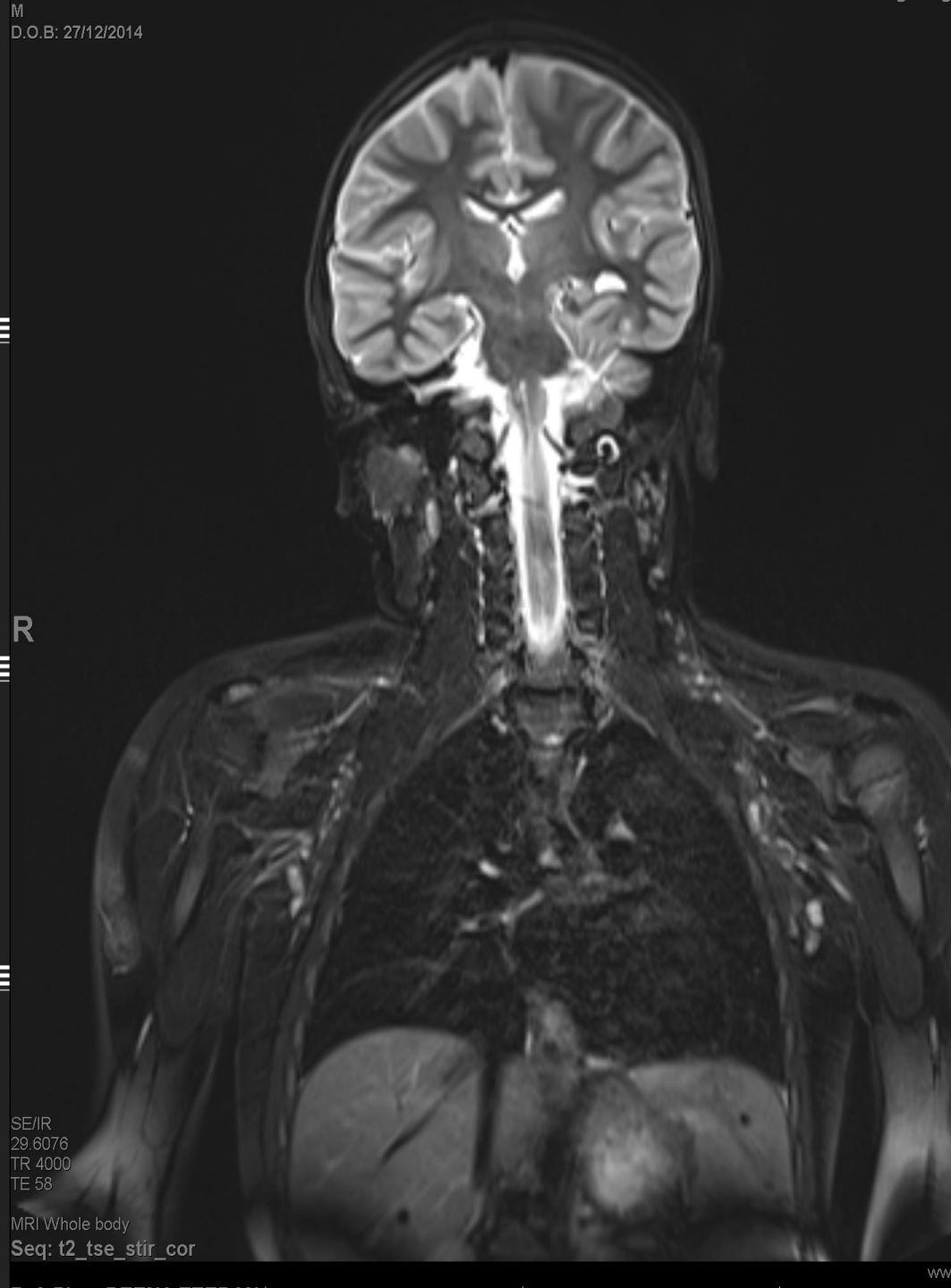
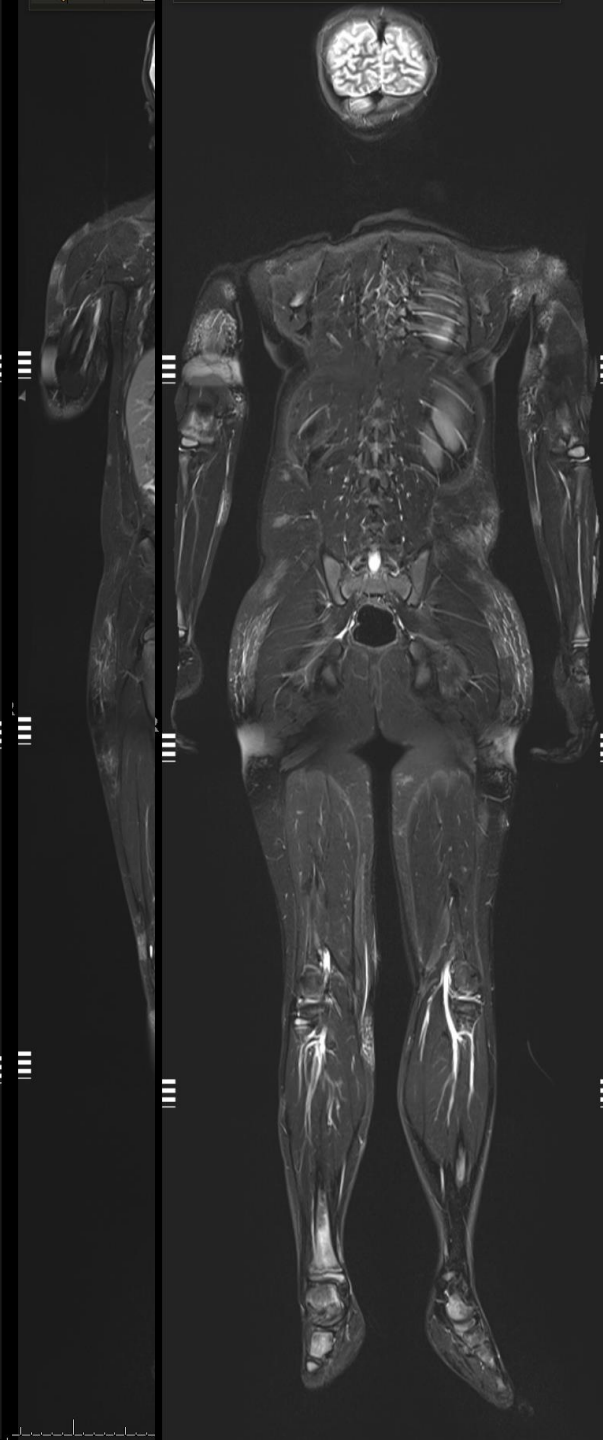
Skin biopsy (HGH): Erythema nodosum

Stool Calprotectin: 86 --> 356

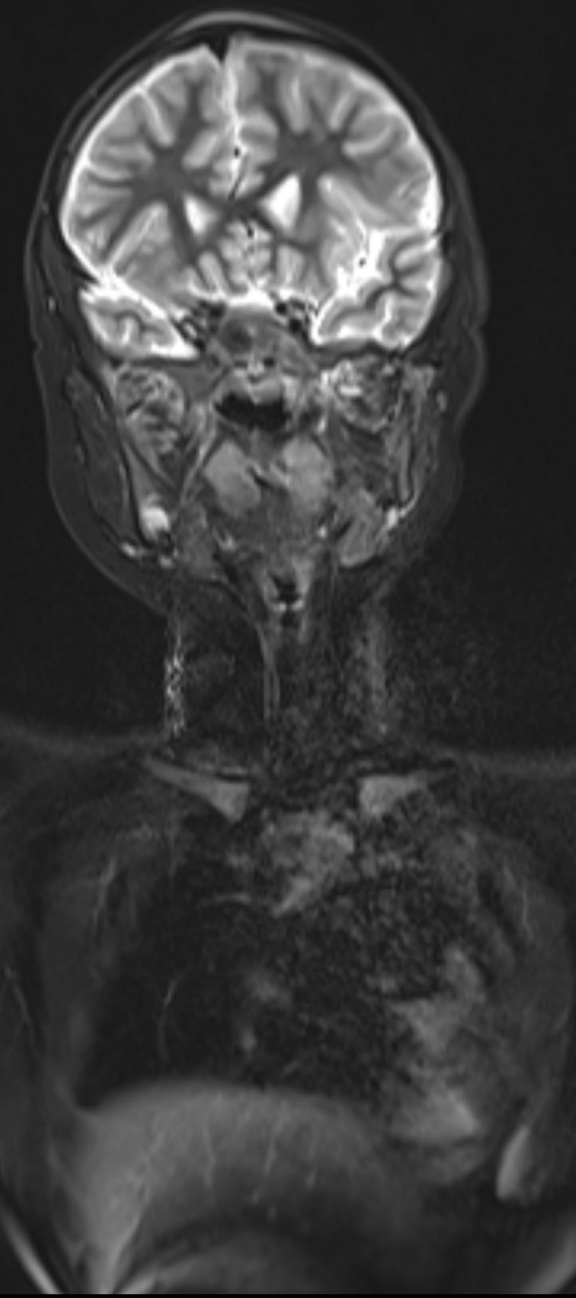
- **Bone marrow aspirate and biopsy:**

Comment

The overall bone marrow findings are nonspecific at this time. No morphologic features of a hematopoietic malignancy or metastatic neoplasm are identified in the above bone marrow specimen. This does not exclude the possibility of bone marrow involvement at another site, and correlation with the imaging findings is needed to exclude a sampling error.



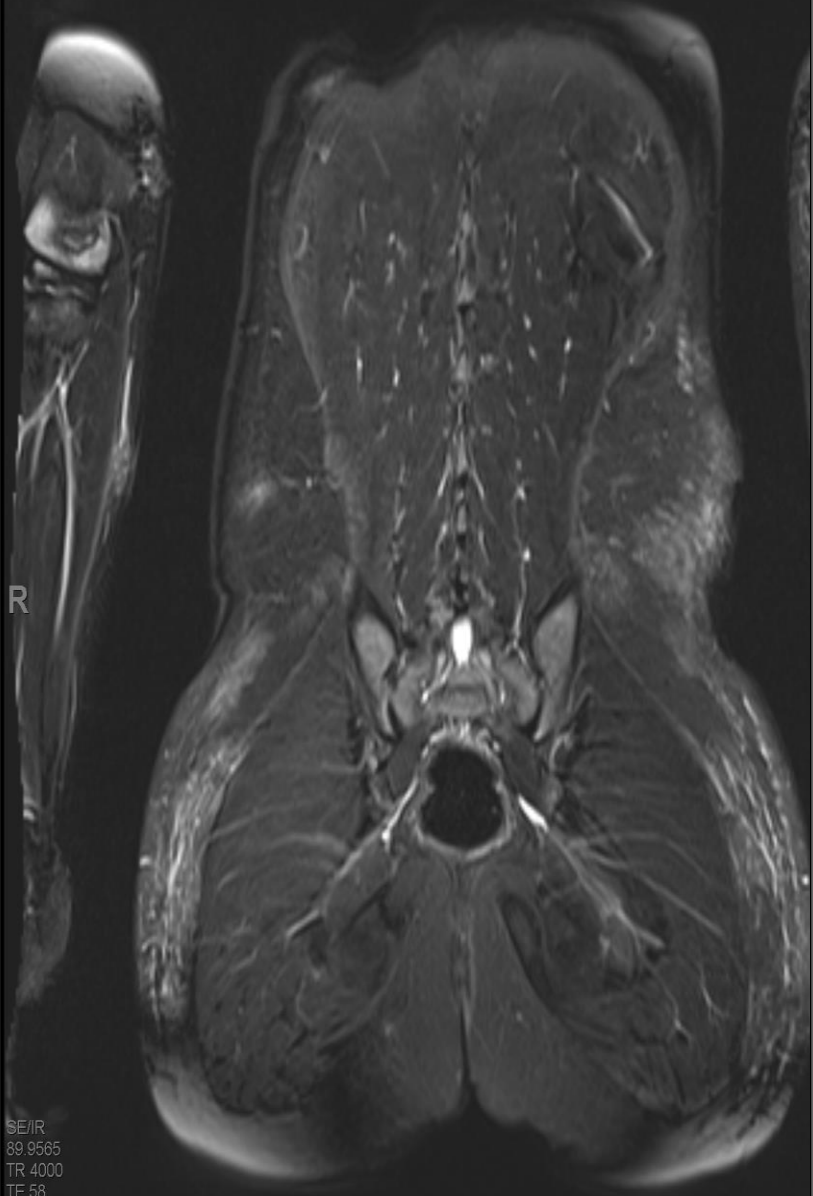
D.O.B: 27/12/2014



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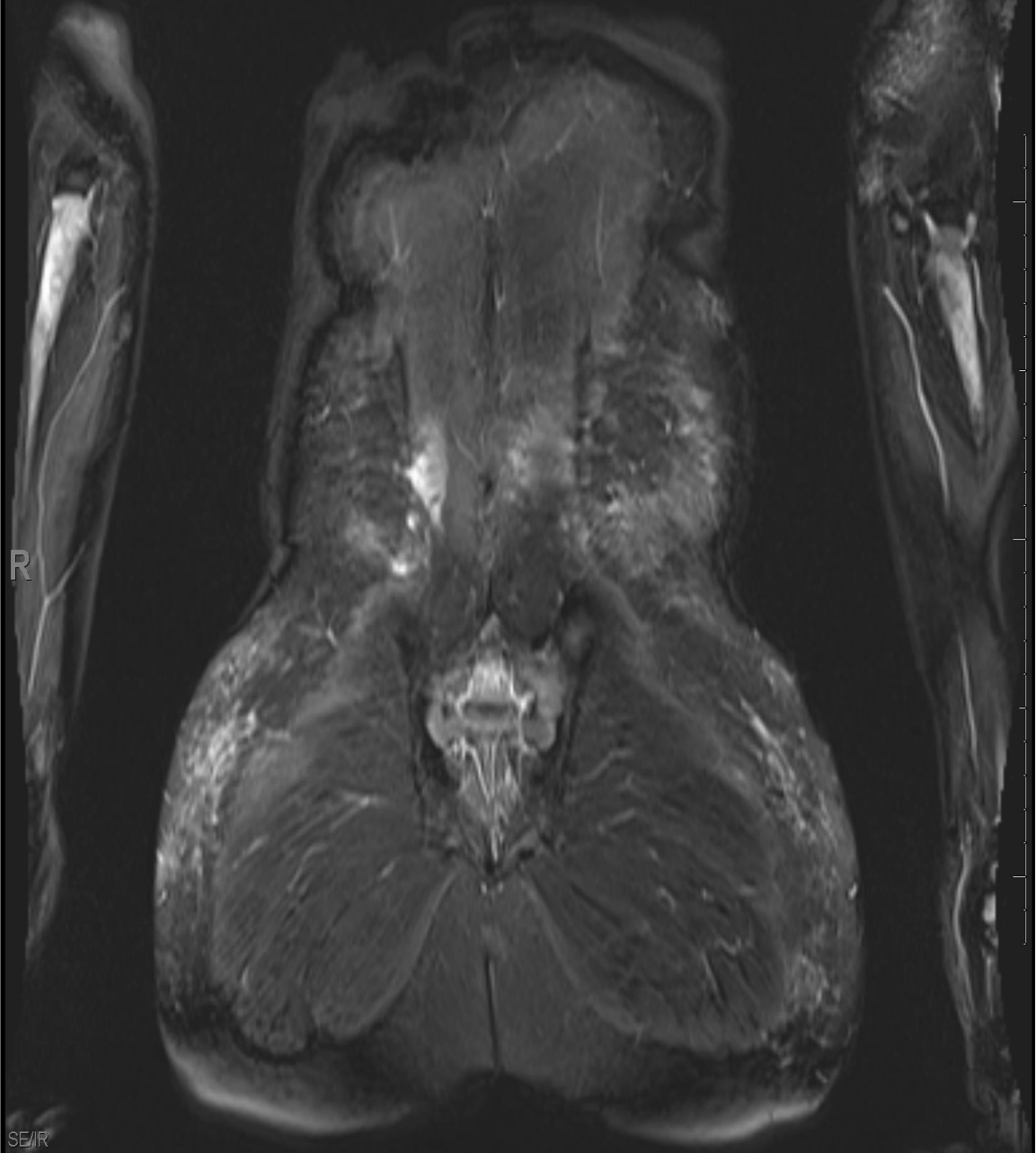
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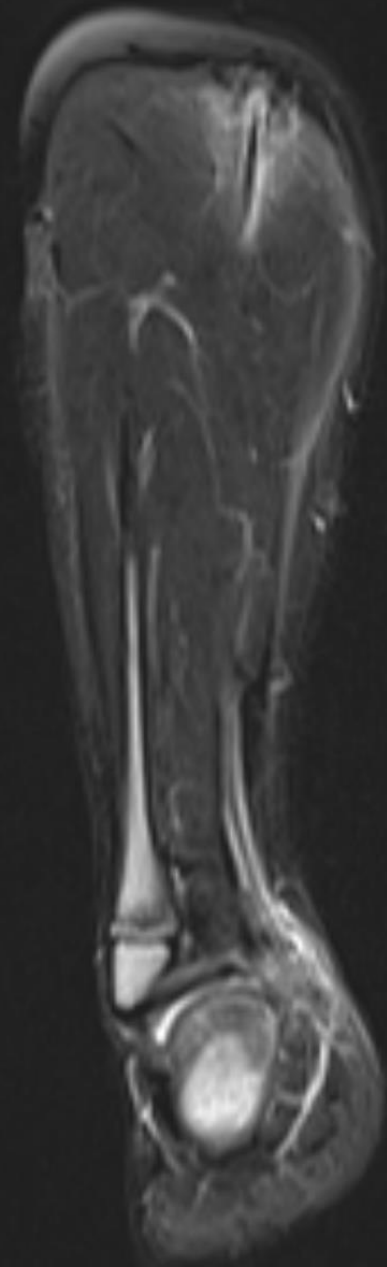
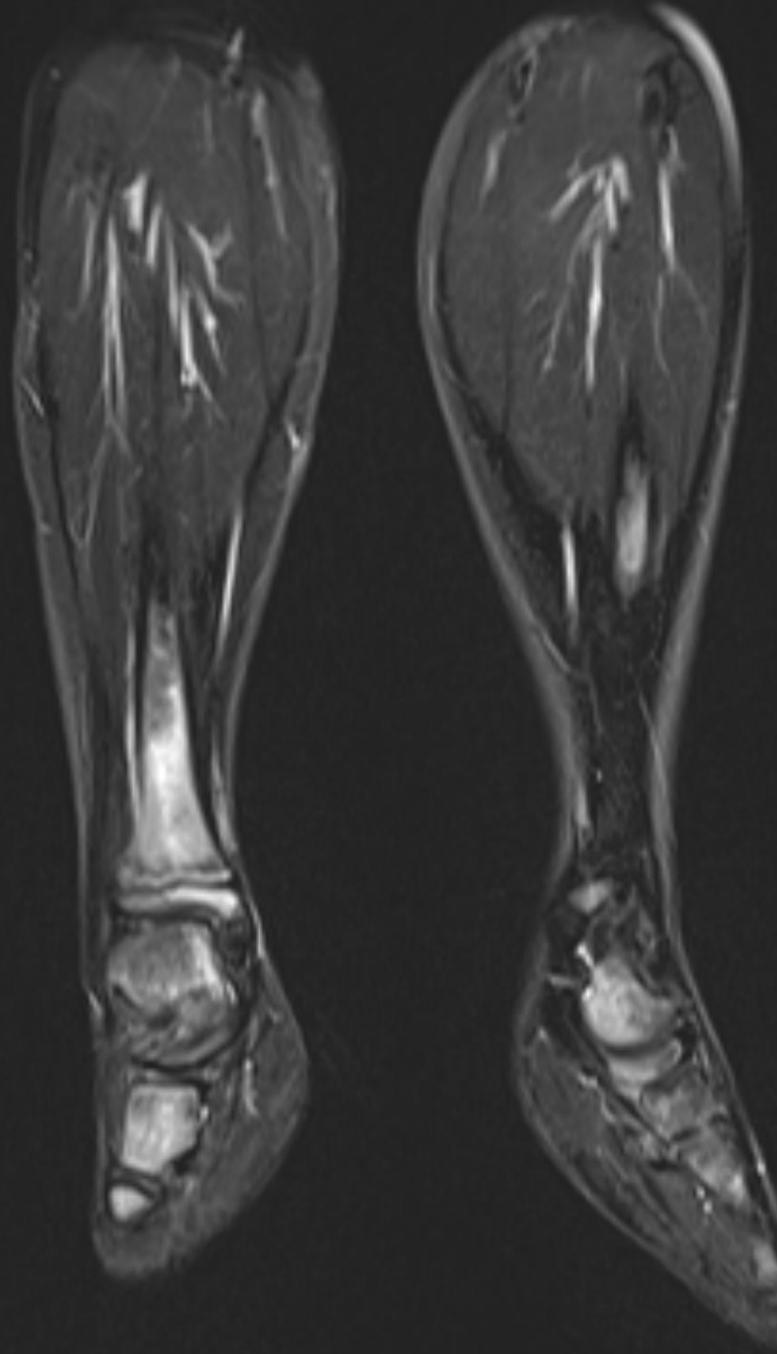
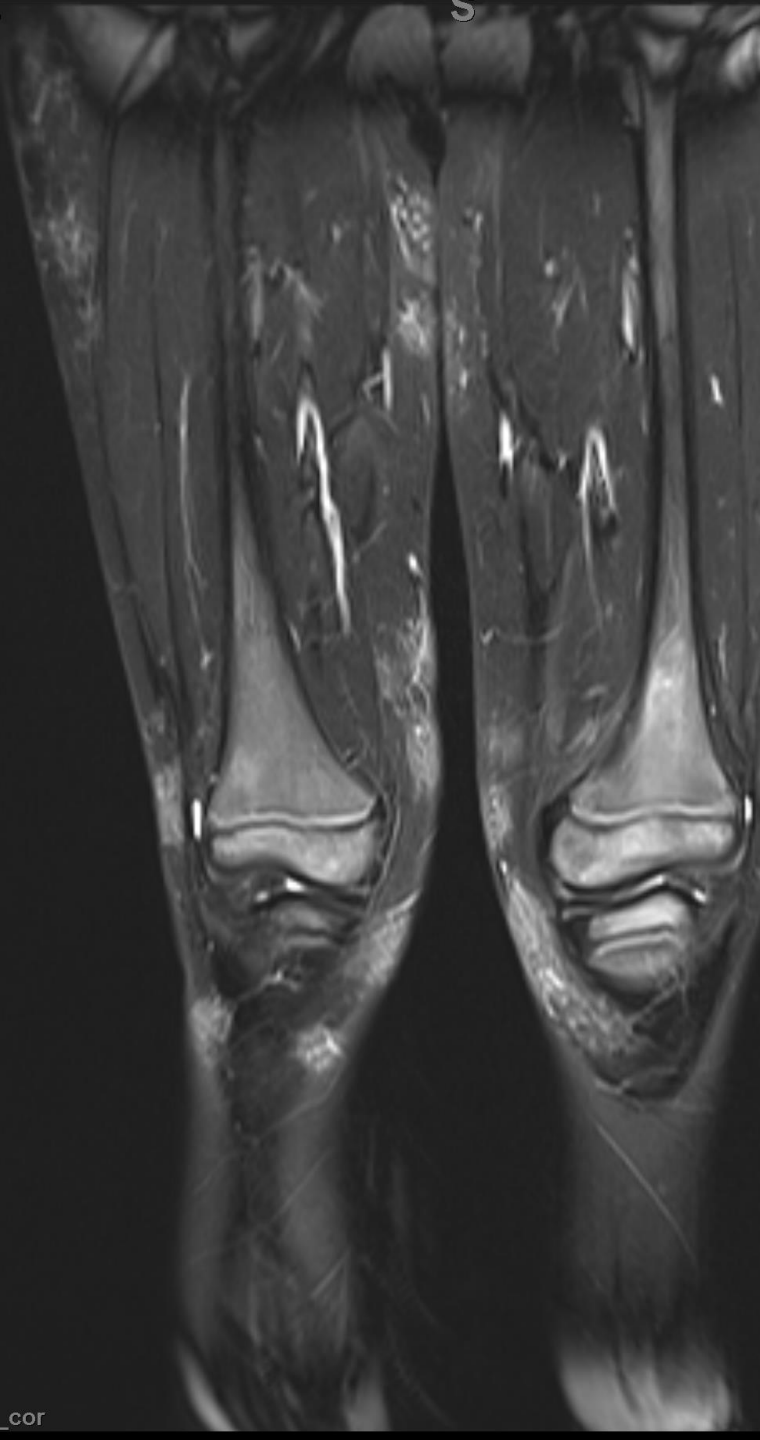
MRI Whole body
Seq: t2_tse_stir_cor

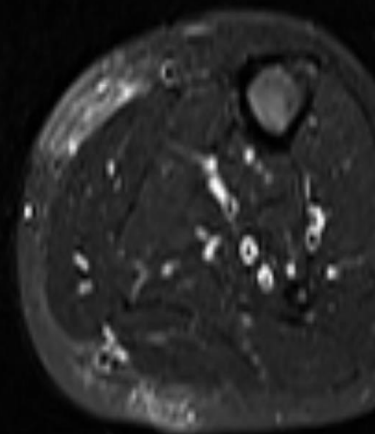
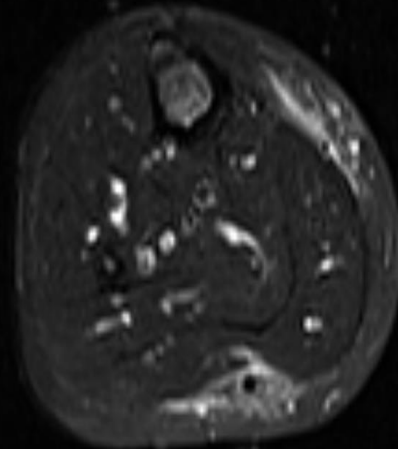
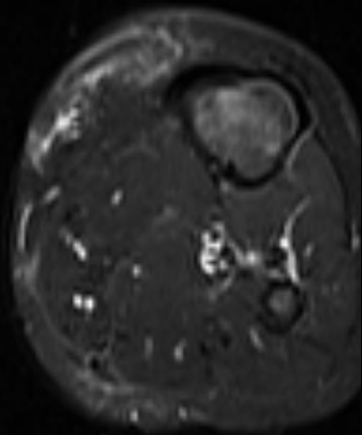
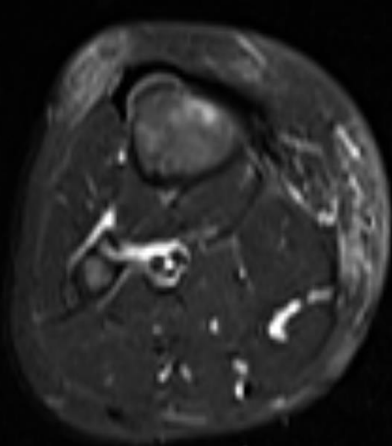
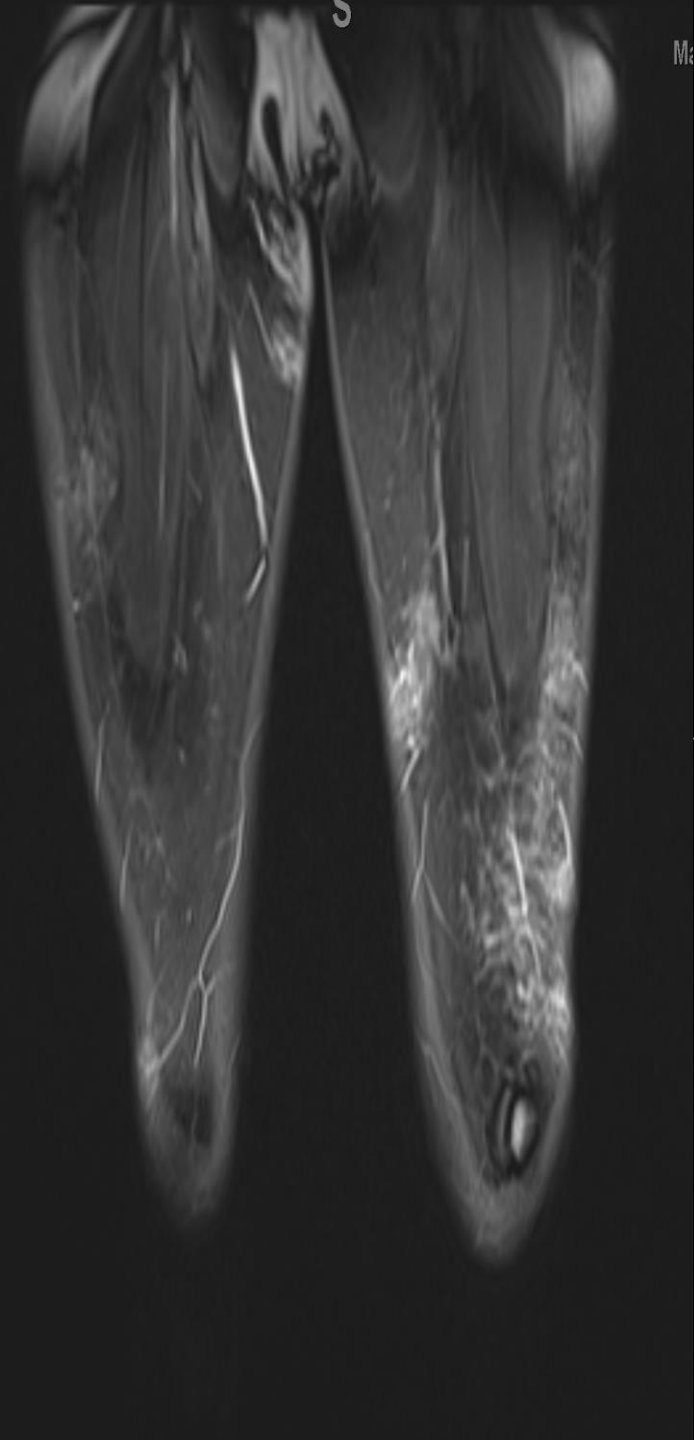


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