

Questions and Answers



Pediatric Providers Webinar

Last update: 5-21-20

Questions Asked May 21, 2020

"COVID-related information from GermWatch and the emerging pediatric multi-symptom inflammatory syndrome" by Dr. Per Gesteland, leader of GermWatch

- 1. I have seen two children just over a year of age that had Roseola. When they presented they had fever for 3 days up to 102. Otherwise they looked well as most patients with roseola do. Should I be sending labs on these febrile children? In retrospect with the resolution of symptoms and the typical roseola rash I know these children were good.**

Answer: Agree, perhaps think about checking in with family to assure that the symptoms have resolved. Let persistence of fever drive actions and if child develops other symptoms, it would be reasonable to get additional labs. Following up on symptoms can direct level of workup.

- 2. We have so few + PCR for SARS-2. Would it be useful to start checking more RVP PCR to check for enterovirus? Useful to start checking more respiratory symptoms?**

Answer: Yes, likely time to get back to routine diagnostic steps and remain vigilant through panel testing. Keep in mind that enterovirus is detected by the respiratory panel but is reported as "rhinovirus". PCR on serum or CSF will detect enterovirus and be reported as such.

- 3. If we see a concerning case would there be value in getting serology for COVID-19, as well as screening labs?**

Answer: Depending on clinical context, if you can get access to serology, this might be helpful. Keep in mind that there may be a window between being positive for COVID-19 by PCR and when they turn positive for IgG.

- 4. Will Intermountain pediatricians soon be allowed to do swabs again?**

Answer: This is currently being evaluated and we don't have an update at this point.