### SUGGESTED PREVISIT WORKUP

- Contact pediatric GI to speak to on call for urgent appointment
- The triad of jaundice, fever, and RUQ likely indicates need for urgent ED evaluation and management.

### SUGGESTED WORKUP

- Consider RUQ ultrasound
- Counsel weight loss if steatohepatitis suspected on ultrasound. Referral to Weight and Wellness recommended
- Consider serum evaluations: Acute viral Hepatitis panel, Hep C ab, TSH, TTG IgA and total IgA, CPK, and ferritin
- Suggest referral to Ped GI

### SUGGESTED MANAGEMENT

- Reassurance
- Recheck full hepatic panel (including INR, GGT) in 2 weeks for trend. If improved or trending downward, can follow for 3-4 months without initiating more extensive workup
- Consider e-consultation or ECHO discussion

### CLINICAL PEARLS

- Not all liver enzyme elevation reflects liver inflammation; consider muscle inflammation in your differential
- It is not unusual for liver enzymes to be elevated post virally for several months
- The primary treatment for non-alcoholic steatohepatitis is weight loss and exercise. If steatosis is noted on ultrasound and BMI is elevated, get them started on a weight loss program!
- Isolated elevation in AST is rarely of concern. Elevation in ALT is more specific to liver inflammation
- The above applies from birth through age 18.