I.III Children And Young People Pathways

I.III.I HSE Pathway for Children and Young People with Lymphoedema **CHILD PRESENTS WITH SWELLING** Medical Can an acute or systemic cause be identified? investigations and Malignancy · Hypothyroidism treatment as appropriate. VTE Low haemoglobin Yes · Renal failure · Severe trauma Include skin Liver failure · Inflammatory skin condition care and · Cardiac failure · Filariasis (overseas travel) elevation · Infection/cellulitis advice · Side effects of medication · Hypoproteinaemia No No No If swelling Does the child Could the child Refer to Has the present have No further potentially Children's swelling for > 3 months decreased oedema have a vascular Health with unidentified mobility/ resolved? management Yes anomaly? Ireland at required cause or child muscle pump? · Wheelchair user Crumlin has h/o lymph Yes **Vascular** node dissection Neurological and/or condition **Anomalies** radiotherapy to Obesity Clinic lymph nodes Yes No No No Can the swelling be No managed by Refer to local lymphoedema clinic if they standard have a paediatric service or to Children's measures? · Skin care **Health Ireland at Crumlin Vascular** Elevation **Anomalies Clinic for assessment by MDT** Activity exercise Yes Management of oedema by Liaise with relevant Health Care Professionals and school Paediatric staff as required - podiatry, footwear clinic, occupational **Physiotherapy** therapy, Adult Physical Disability, Transition Teams, Service physiotherapy, health visiting, school nursing etc. (Acute and Community)