Identifying Opportunities to Improve the Care of Children with Kawasaki Disease in Concordance with National Guidelines

Stephanie Syu, MD, Riley Boland, MD, Michelle Kelly MD, MS, Erica Terry, Allison Krivanec, Monica Bogenschutz, PharmD, Jodie Ritchie, PharmD, Michelle Brenson, RN, Ryan Coller, MD, MPh, Sabrina Butteris, MD, Mary Ehlenbach, MD, Kirstin Nackers, MD, Daniel Sklansky, MD, Kristin Tiedt, MD, Kristin Shadman, MD, Sarah Webber, MD, Carrie Nacht, MPH, and Ann Allen, MD

1University of Wisconsin School of Medicine and Public Health, Department of Pediatrics
2American Family Children’s Hospital 3SSM Health St. Mary’s Madison

BACKGROUND
Kawasaki disease (KD) is the leading cause of acquired heart disease in children in developed countries.
American Heart Association (AHA) released clinical guidelines in 2017 regarding best practices for diagnosing and managing children with KD.
Institutional adherence to these guidelines has not been evaluated.

RESULTS
A 5-year retrospective chart review of pediatric patients with Kawasaki disease revealed opportunities for improvement in consultation, treatment of refractory cases, and follow up care.

METHODS
Retrospective chart review of 55 children 0-18 years old with discharge code for KD was conducted at two Midwest hospitals (academic and community) between January 2014 – December 2018.
Electronic health record data were summarized in the context of AHA recommendations, included laboratory, consultation, echocardiogram, and medication and vaccine administration information.

CONCLUSIONS
Opportunities exist to improve care for patients with KD based on recently published clinical guidelines.
These data will be used in a quality improvement project to standardize initial evaluation, inpatient consultation, timing and treatment of IVIG refractory cases, as well as post-discharge KD care.

ADDITIONAL INFORMATION
Reference:
Contact:
Ann Allen, MD
ahallen@pediatrics.wisc.edu
Stephanie Syu, MD
Ssyu@uwhealth.org