Child presents to ED with suspected foreign body (FB) ingestion (based on history and/or symptoms)

Assessment (history and examination)
Aim to identify size, shape and nature of FB and time of ingestion. Keep child nil by mouth. Assess all children at risk in missing button battery incident.

- Button battery ingestion excluded
  - No signs of airway or GI obstruction or perforation
- X-ray required? (Box A)
  - X-rays: neck, chest and abdomen
  - +/- lateral X-rays (to identify >1 magnet)

Period of observation
- X-ray required? (Box A)
  - X-ray within 24 hours only required for oesophageal body (consider inpatient admission)
- Symptoms?
  - Close observation
  - Repeat X-ray within 24 hours only if child symptomatic or objects >1 cm in diameter and >6 cm in length
- Specialist advice required? (Box B)
  - Button battery ingestion possible
  - Urgent neck, chest and abdomen X-rays (contact RSQ if no X-ray facility onsite)
  - Confirmed or suspected button battery?
    - Urgent neck, chest and abdomen X-rays
      - Suspect GI perforation or obstruction
      - Manage airway as required
      - Consider seeking senior assistance available onsite (such as critical care, ENT, anaesthetics) as per local practice
    - Button battery in stomach or intestine?
      - Emergency endoscopy required if:
        - symptomatic or
        - battery >15 mm in child aged <6 years
      - Urgent referral to Paeds Surgery
    - Button battery in oesophagus?
      - Urgent referral to ENT
      - Time-critical endoscopy required if:
        - <12 hours post-ingestion
        - child aged >1 year
        - button battery ingestion possible
      - Discharge
        - With advice
          - Urgent referral to Paeds Gastro
    - Specialist advice required?
      - Urgent referral to Paeds Surgery

Box A: Consider not proceeding with X-rays if child meets ALL of the following:
  - asymptomatic
  - normal clinical examination
  - certain history of ingesting object that is ALL of:
    - <2 cm in diameter and <6 cm long
    - not sharp or pointed
    - not a magnet or battery
    - non-expandable
    - non-toxic
  - able to eat and drink
  - no known GI abnormalities

Seek urgent advice via Retrieval Services Queensland (RSQ) on 1300 799 127 if not onsite
Seek prompt advice via onsite/local specialist service
Seek advice if any of:
  - symptomatic or
  - > 24 hours post-ingestion of oesophageal FB
  - gastrointestinal abnormalities

Box B: Specialist advice recommendations

<table>
<thead>
<tr>
<th>Ingested object</th>
<th>Location of foreign body and relevant specialist</th>
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| Oesophagus – EN | Stomach – Paeds Gastro | Beyond – Paeds Gastro*
| Button battery   | |
| Multiple magnets or single magnet and metallic object | |
| Sharp or pointed objects | |
| Lead-containing or other toxic objects** | |
| Expandable (superabsorbent polymers) | |
| Single magnet | |
| Food bolus | |
| None of the above but >2 cm in diameter and/or >6 cm in length | |
| None of the above | |

* Will refer to Paediatric Surgery if needed
** Seek toxicologist advice via Poisons Information Line (PPI): 13 11 26 if unsure

For more information view CHQ-GDL-60019 – Ingested foreign body – Emergency guideline