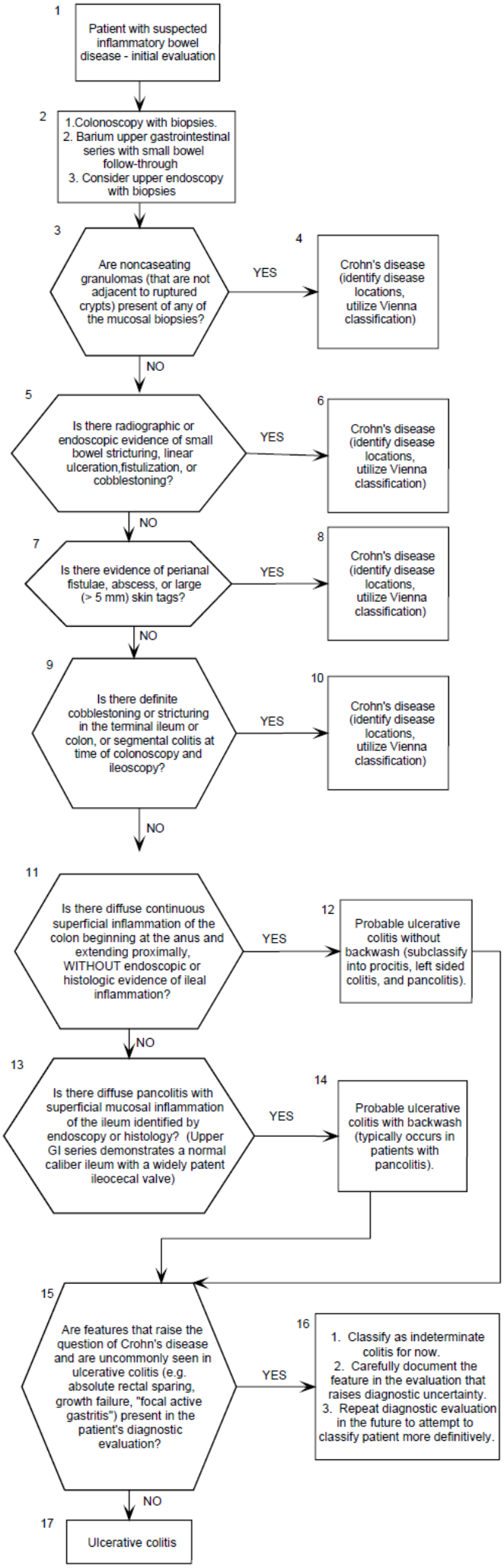
1
Patient with suspected inflammatory bowel disease - initial evaluation
2
1.Colonoscopy with biopsies.
2. Barium upper gastrointestinal series with small bowel follow-through
3. Consider upper endoscopy with biopsies
3
Are noncaseating granulomas (that are not adjacent to ruptured crypts) present of any of the mucosal biopsies?
YES
4
Crohn's disease (identify disease locations, utilize Vienna classification)
NO
5
Is there radiographic or endoscopic evidence of small bowel stricturing, linear ulceration,fistulization, or cobblestoning?
YES
6
Crohn's disease (identify disease locations, utilize Vienna classification)
NO
7
Is there evidence of perianal fistulae, abscess, or large (> 5 mm) skin tags?
YES
8
Crohn's disease (identify disease locations, utilize Vienna classification)
NO
9
Is there definite cobblestoning or stricturing in the terminal ileum or colon, or segmental colitis at time of colonoscopy and ileoscopy?
YES
10
Crohn's disease (identify disease locations, utilize Vienna classification)
NO
11
Is there diffuse continuous superficial inflammation of the colon beginning at the anus and extending proximally, WITHOUT endoscopic or histologic evidence of ileal inflammation?
YES
12
Probable ulcerative colitis without backwash (subclassify into procitis, left sided colitis, and pancolitis).
NO
13
Is there diffuse pancolitis with superficial mucosal inflammation of the ileum identified by endoscopy or histology? (Upper GI series demonstrates a normal caliber ileum with a widely patent ileocecal valve)
YES
14
Probable ulcerative colitis with backwash (typically occurs in patients with pancolitis).
15
Are features that raise the question of Crohn's disease and are uncommonly seen in ulcerative colitis (e.g. absolute rectal sparing, growth failure, "focal active gastritis") present in the patient's diagnostic evaluation?
YES
16
1. Classify as indeterminate colitis for now.
2. Carefully document the feature in the evaluation that raises diagnostic uncertainty.
3. Repeat diagnostic evaluation in the future to attempt to classify patient more definitively.
NO
17
Ulcerative colitis