

A PROTOCOL FOR THE DIAGNOSIS OF KAWASAKI DISEASE IN ACUTE PHASE

HOSPITAL :.....CHART NO:..... CASE NO:.....
NAME: SEX: M / F AGE :.....BIRTH DATE:.....
REPORTING DOCTOR.....

ENROLEMENT CRITERIA

- Fever + 4/5 Principal criteria Fever plus 3/5 principal criteria plus
Coronary artery dilatation
- Referred cases received IVIG and aspirin within 10 days after onset

OTHER COMMENTS FROM THE INVESTIGATOR

ENCIRCLE THE QUESTIONARE ANSWERS

DIAGNOSTIC CRITERIA

FEVER persisting for at least 5 days YES/NO

PRINCIPAL CLINICAL FINDINGS

1. Bilateral conjunctiva injection YES/NO
2. Acute cervical lymphadenopathy (unilateral/bilateral/firm/
slightly tender with a diameter of 1.5cm) YES/NO
3. Strawberry tongue, oropharyngeal erythema, redness and cracking
of lips (ulcerative lesions not seen) YES/NO
4. Polymorphic exanthema: - erythematous maculopapular rash, starting
with red palms and soles and moving to the trunk /urticarial exanthem
(bullae and vesicles are not seen) YES/NO
5. Red, swollen, indurated hands and feet and later desquamation of
hands and feet after 1-3 weeks YES/NO

CORONARY ARTERY INVOLVEMENT YES/NO

TREATMENT GIVEN

IVIG 2 GM/KG/BWT /X24HRS		
ASPIRIN 60MG/KG/BWT		
VIT A X 4 DAYS		
VIT C X 10 DAYS		
VIT E X 10 DAYS		

ANY ADEVERSE RREACTIONS TO ACE

YES/ NO

CORONARY ARTERY DIMENTIONS BY 2-D ECHOCARDIOGRAM

Date	Days After Onset	Days After AO	RCA (mm)	LMC (mm)	LCX (mm)	LAD (mm)	Remarks*/SYMPTOMS
		0					
		7					
		14					
		2months					
		4months					

*Coronary artery ectasia (dilatation); Aneurysm:-Multiple/single/saccular/fusiform/segmental; Pericardial effusion

AO (antioxidant) group CO (control) group

Signature of the Doctor