

AFP Clinical Answers

Endometrial Biopsy, Circumcision, Fever in Children, Thyroid Nodules, Pancreatitis

When is endometrial biopsy helpful as a diagnostic tool?

Endometrial biopsy should be performed for patients with abnormal uterine bleeding who are 45 years or older and in younger patients with a significant history of unopposed estrogen exposure, persistent bleeding, or in whom medical management is ineffective. Patients with postmenopausal bleeding but no risk factors for endometrial hyperplasia or cancer may have transvaginal ultrasonography or endometrial biopsy as a first-line approach to evaluation.

<https://www.aafp.org/afp/2020/0501/p551.html>

When evaluating infants for circumcision, what finding would prompt referral to a pediatric urologist?

Infants with abnormal penile anatomy such as chordee, epispadias, hypospadias, and penile torsion should be referred to a pediatric urologist.

<https://www.aafp.org/afp/2020/0601/p680.html>

What tests and imaging should be performed for children with a fever who are younger than three years?

Neonates younger than 28 days with a fever higher than 100.4°F (38°C) should have a diagnostic evaluation, including a thorough history, physical examination, complete blood count, blood cultures, lumbar puncture, urinalysis, and urine culture. For febrile children older than 28 days but younger than three months, diagnostic evaluation should include a thorough history, physical examination, urinalysis, and risk assessment tools that may include additional tests such as a complete blood count, procalcitonin, and C-reactive protein. Lumbar puncture may be considered but is not suggested for all infants in this age range. In febrile children older than 28 days, the need for chest radiography is determined by clinical presentation

and laboratory examinations. Radiography is not recommended for wheezing suggestive of bronchiolitis or asthma. Febrile children older than two months but younger than three years should be assessed for possible urinary tract infection if no other source of fever has been identified.

<https://www.aafp.org/afp/2020/0615/p721.html>

When evaluating a new thyroid nodule, what imaging and laboratory testing should be completed?

Thyroid ultrasonography with a survey of the cervical lymph nodes should be performed in all patients with thyroid nodules. The serum thyroid-stimulating hormone level should be measured during the initial evaluation of a thyroid nodule. If it is low, a radionuclide thyroid uptake scan should be performed.

<https://www.aafp.org/afp/2020/0901/p298.html>

In patients with triglyceride levels of 500 mg per dL or higher, what medications can be given to reduce the risk of pancreatitis?

Prescribe fibrates and omega-3 fatty acids for patients with triglyceride levels of 500 mg per dL (5.65 mmol per L) or higher to reduce the risk of pancreatitis.

<https://www.aafp.org/afp/2020/0915/p347.html>

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