

damage and removal of platelets produce the characteristic thrombocytopenia.

Diagnostic Evaluation

The triad of anemia, thrombocytopenia, and renal failure is sufficient for diagnosis (Box 26-4). Renal involvement is evidenced by proteinuria, hematuria, and urinary casts; BUN and serum creatinine levels are elevated. A low hemoglobin and hematocrit and a high reticulocyte count confirm the hemolytic nature of the anemia.

Box 26-4

Clinical Manifestations of Hemolytic Uremic Syndrome

Vomiting

Irritability

Lethargy

Marked pallor

Hemorrhagic manifestations:

- Bruising
- Petechiae
- Jaundice
- Bloody diarrhea

Oliguria or anuria

Central nervous system (CNS) involvement: