gonorrhoeae), and determination of leukocyte count. In addition, perform blood cultures and obtain complete blood count with differential and ESR or CRP level. Early radiographic findings are limited to soft-tissue swelling but may reveal a foreign body, and such films always provide a baseline for comparison. Technetium scans reveal areas of increased blood flow but will not differentiate between sites. MRI and CT scans provide more detailed images of cartilage loss, joint narrowing, erosions, and ankylosis of progressive disease. Ultrasonography is helpful in the detection of joint effusions and fluid in the soft tissue and subperiosteum (Kaplan, 2016b).

Treatment is IV antibiotic therapy based on Gram stain results and the clinical presentation. The benefits of serial aspirations to demonstrate sterility of synovium fluid and reduce pressure or pain are controversial. Pain management is an important aspect of nursing care, particularly with involvement of a large joint such as the hip. Surgical intervention may also be required if there was a penetrating wound or a foreign object was possibly involved. Physical therapy may be initiated for the child who is immobilized to prevent flexion contractures. Additional nursing care is the same as for osteomyelitis.

Skeletal Tuberculosis

In children, tubercular infection of the bones and joints is acquired by lymphohematogenous spread at the time of primary infection. Occasionally, it is from chronic pulmonary TB. Skeletal tubercular infection is not common in the United States but should be considered in communities with high TB case rates. The condition is a late manifestation of TB and is most likely to involve the vertebrae, causing tubercular spondylitis. If the infection is progressive, it causes **Pott disease** with destruction of the vertebral bodies and results in kyphosis and spinal malalignment. Symptoms are insidious. The child may report persistent or intermittent pain. Other findings include joint swelling and stiffness; fever and weight loss are not common. Tubercular arthritis can also affect single joints (such as a knee or hip) and tends to cause severe destruction of adjacent bone. Infection in the fingers causes spina ventosa, a tuberculous dactylitis.