

## Management of children suspected of injecting 'super strong' magnets

If a rare earth magnet is ingested with a button battery this is a **TIME CRITICAL EMERGENCY** (refer to button battery guidance)

Witnessed or suspected rare earth magnet ingestion  
**OR**  
Unexplained GI symptoms with rare earth magnets in the child's environment (Follow TOXBASE advice whilst following the flowchart below)

Request **Urgent** Erect CXR and AXR (with the patient lying down, ideally prone)  
Request a lateral AXR only if a single magnet is seen

-Clinical features or radiological signs of obstruction or perforation  
- Multiple magnets

Single Magnet

**Discharge Criteria Met?**

- Single Magnet
- Accidental ingestion
- No co-morbidities
- Tolerating oral intake
- Attended within 24hrs of ingestion
- Caregiver able to observe closely

Discuss with local surgical team (+/- Paediatric) for admission, observation and repeat X-ray

Patient Advice Leaflet  
Return for repeat Xray

Follow up AXRs at least 6-12 hours apart until the magnet has passed through the stomach and moving through the small bowel  
Ensure same position for AXR each time

Progression of single magnet (confirmed by radiologist if any doubt after senior A&E clinician review) **AND** Remains asymptomatic

Discharge with safety net advice and ensure that Patient advice leaflet has been given

Symptoms or signs at any time

Failure of magnet to progress but remains asymptomatic

**URGENT**  
Discuss with Paediatric Surgical Centre to plan for further management +/- transfer

Discuss with Paediatric Surgical Centre to make plan for further imaging, observation +/- removal