DAYTON CHILDREN'S HOSPITAL

CLINICAL PRACTICE GUIDELINES

**DISCLAIMER:** This Clinical Practice Guideline (CPG) generally describes a recommended course of treatment for patients with the identified health needs. This CPG is not presented and should not be used as a substitute for the advice of a licensed independent practitioner, as individual patients may require different treatments from those specified, and guidelines cannot address the unique needs of each patient. Dayton Children’s shall not be liable for direct, indirect, special, incidental or consequential damages related to the use of this CPG.
ED Pathway for Evaluation / Treatment of Febrile Infants 0-28 Days

**Inclusion Criteria:**
- Infant ≤ 28 days of age
- Fever ≥ 38°C rectally
- Previously healthy:
  - Born at term (≥ 37 weeks gestation)
  - Did not receive perinatal antimicrobial therapy
  - No systemic antibiotics within past 72 hours
  - Was not treated for unexplained hyperbilirubinemia
  - Had not been previously hospitalized
  - No chronic medical problems
  - Was not hospitalized longer than mother

Begin clinical assessment

**Exclusion Criteria:**
- Infants with underlying disorders that affect their immunity or might otherwise increase their risk for serious infection
- Infants on current antimicrobial therapy
- Infants who have received immunization within 48 hours
- Infants presenting with seizures
- Infants requiring intensive care management

**Focal infection on examination (Positive Influenza/RSV, or UTI NOT considered focal infection)**

**Perform complete workup and begin acyclovir for any of the following:**

**Historical and clinical features:**
- severe illness
- hypothermia
- lethargy
- seizures
- hepatosplenomegaly
- postnatal HSV contact
- vesicular rash
- conjunctivitis
- interstitial pneumonitis
- Mother known to have primary HSV infection at delivery
- ≤ 21 days

**Laboratory features:**
- Thrombocytopenia
- CSF with > 20 WBC/mm³ without clear bacterial infection

**Antibiotics:**
- Ampicillin 50 mg/kg
- Cefotaxime 50 mg/kg (if shortage: Gentamicin)  
  Post Natal Age < 7 days and Gestational Age ≤35 weeks:
  3 mg/kg/dose every 24 hours
  Post Natal Age < 7 days and Gestational Age > 35 weeks or Post Natal Age ≥ 7 days: 4 mg/kg/dose every 24 hours
- Acyclovir 20 mg/kg if ≤21 days or if indicated: See box 6

Admit

12/05/2016
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References


