

Hunter New England Health - Southern sector
ACUTE MANAGEMENT OF INFANTS AND CHILDREN < 3 yrs WITH FEVER
 (20+ acute beds hospital)

Name _____

MRN _____

Fever

Triage: Date: _____ Time: _____

Presenting Problem: _____

Priority: _____ **Area:** _____ **Interpreter Required:** _____

Triager Name (print): _____ **Triager Name (signature)** _____

Highest recorded temp (*during this illness-state method*):

Age (in months):

Weight:

Time of Medical Review:

INITIAL ASSESSMENT (tick the feature below) – Remember to take a **thorough** history & examination.

CLINICAL STATUS	ACTION	INVESTIGATIONS	DISPOSITION
<input type="checkbox"/> NEEDS RESUSCITATION	Commence Resuscitation Call Retrieval Team	If circumstances permit FBC, Blood Cultures, UEC, urine*, CXR, LP if no contraindications	Transfer to a higher level care facility & admit for IV Antibiotics
<input type="checkbox"/> AGE < 3 MONTHS	Urgent Medical review Consider Retrieval Team or arrange transfer	If circumstances permit FBC, Blood cultures, UEC, urine*, CXR, Consider LP	Transfer to a higher level care facility & admit for IV Antibiotics
<input type="checkbox"/> TOXIC <i>A 'toxic' child appears drowsy, lethargic or irritable, pale, mottled, tachycardic, has breathing difficulties</i>	Treat as Priority 2 Triage Consider Retrieval Team or arrange transfer	If circumstances permit FBC, Blood cultures, UEC, urine*, CXR, Consider LP.	Transfer to a higher level care facility and admit for IV Antibiotics

- If temp is 41 degrees or above, actively treat with anti-pyretics
- Beware of child with rash within 24 hrs of onset of illness

FOCUS OF INFECTION FOUND	ACTION	DISPOSITION
<input type="checkbox"/> YES	Investigate focus and treat as appropriate Consult Therapeutic Guidelines	Consult Paediatrician Admit/transfer if requires IV Antibiotics
<input type="checkbox"/> NO – Temp < 39 (per axilla)	Urine Culture* Consider alternative diagnosis	Discharge from ED with Fever fact sheet Clinical review next day
<input type="checkbox"/> NO – Temp > 39 (per axilla)	FBC, blood culture and urine culture* <input type="checkbox"/> if WCC < 15,000	Discharge from ED with Fever fact sheet Clinical Review 12-24 hours
	<input type="checkbox"/> if WCC > 15,000, do urine culture*, B/C, CXR and consider LP	Transfer for Senior Medical Review
ANIT-PYRETICS: Doses: Paracetamol: 15mg/kg 4/24 (max 4 doses in 24hrs) OR Ibuprofen: not recommended if <6 months old. Otherwise, 5-10mg/kg (6-8 hrly, max 4 doses in 24hrs)	ANTIBIOTICS: 0-3 months: Ampicillin IV 50mg/kg 6/24 Gentamicin IV 7.5mg/kg Daily > 3 months: Penicillin G IV 30mg/kg 4/24	

*Urine sent for culture must be SPA, Catheter or Clean Catch.

FOLLOW UP

All children who are discharged home from the ED with fever should be followed up the following day, either in ED or by their family doctor, to detect progression of infection, response to treatment and results of investigations.
Provide family with letter to GP stating clinical diagnosis & investigations performed plus 'Fever' fact sheet.

Doctor Name (print) _____ **Doctor Name (signature)** _____ **Date:** _____ **Time:** _____