Fever and Sepsis Evaluation in the Infant (Ages 29-60 days)

THIS PATHWAY SERVES AS A GUIDE AND DOES NOT REPLACE CLINICAL

¹Ill Infant (potential signs):

responsiveness Inconsolability Respiratory distress

Poor feeding

Decreased

Cyanosis

 Seizures Parental concern

Petechial rash

Provider concern

²Risk Factors for HSV:

Although uncommon in

should be considered if

HSV lesions

Infants with

hypothermia.

ulcers, CSF

absence of a

elevated ALT

Maternal history of

vesicles, seizures,

mucous membrane

pleocytosis in the

positive gram stain

result, leukopenia,

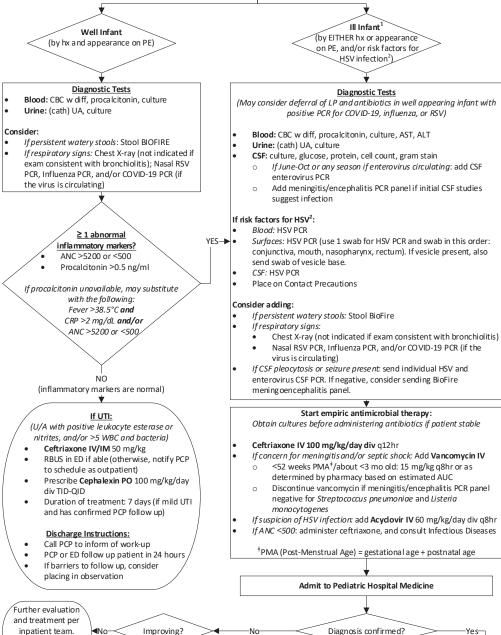
thrombocytopenia.

this age group, HSV

under 6 weeks:

Excessive sleeping

Inclusion Criteria: Infant 29-60 days of age with rectal temp ≥38.0°C/100.4°F (at home, PCP, or in ED), gestational age ≥35 weeks Exclusion Criteria: Currently admitted to NICU, gestational age <35 wks, immunodeficiency, known focal infection, underlying chronic medical disease, current antibiotic therapy, bronchiolitis (see Bronchiolitis Clinical Pathway)



Treat as indicated

- Consult Infectious Disease if concern for meningitis, bacteremia, HSV, UTI with Multi-Drug Resistant (MDR) organism, pyelonephritis complicated by intrarenal or perinephric abscess
- Consult Ophthalmology if any of the HSV PCR tests are positive If UTI confirmed:
- - If grows enterococcus, change to amoxicillin 50 mg/kg/day div TID
 - May still d/c home at 24 hrs if well appearing and blood and CSF cultures negative (do not need to wait for sensitivities). Follow up/ with sensitivities and adjust antibiotics if needed
 - Duration of treatment: 7 days if responds quickly to antibiotics, otherwise 10 days

CSF HSV PCR negative

No new symptoms of concern

manually inspected only once daily.

Family understands discharge instructions and ongoing infant needs

Infant well appearing, improving clinically and tolerating feeds well

incubation. Must call lab tech to check culture plates as these are

Blood culture (which is continuously monitored) negative at 24 hours

Urine and CSF cultures (if obtained), negative after at least 24 hours of

Discharge Criteria:

Follow-up provider identified; discharge plan and close follow-up

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Consider Infectious Diseases consult.