Febrile Pediatric Oncology Patient Clinical Practice Guideline
Emergency Department – Initial Treatment

Replaces previous protocols: “Clinical Algorithm for Initial Management of Oncology Patients with Fever and Neutropenia” and “Initial Management of Pediatric Oncology Patients with Fever and No Neutropenia”

All patients ≥3 months with a history of malignancy currently undergoing chemotherapy presenting with:
   a. Fever or history of fever >38.0 C

Triage Nurse identifies patient as high-risk, assigns ESI 2 and notifies Attending or Senior ED resident (phone 3988)
Immediate bedding of patient, activate as Trigger patient if there is no bed available

Is the patient hemodynamically unstable?

Nursing Interventions:
   1. Access port-a-cath or central line, insert peripheral IV ONLY IF PATIENT DOES NOT HAVE a central line/port
   2. Obtain CBC with differential, blood culture from the patients port or line

Physician Interventions:
   1. Confirm fever
   2. Confirm medication allergies
   3. Identify potential source for fever
   4. Give ceftriaxone 50 mg/kg IV/IM or Vancomycin and Gentamicin for cephalosporin/penicillin allergic patients*
   5. Further workup and diagnostic evaluation as clinically indicated
   6. Phone contact with on-call Maine Children’s Cancer Program Oncologist mandatory prior to discharge.

CPG Goals:
   1. Blood culture and antibiotic administration within 60 minutes from arrival to the ED
   2. NO RECTAL TEMPS OR MEDS
   3. Discharge appropriate low-risk patients to outpatient follow-up

Resuscitate as indicated
Off CPG
*DO NOT WAIT FOR LAB RESULTS PRIOR TO ANTIBIOTIC ADMINISTRATION! Give even if source is likely viral. If difficult IV access, consider IM administration.

Criteria for Discharge from the Emergency Department:

1. Non-toxic appearing
2. Have access to a telephone and ability to return to the ED if condition worsens
3. Absence of neutropenia (defined as an absolute neutrophil count of less than 500 cells/uL)
4. Contact made with Maine Children Cancer Center On-call Physician to discuss care