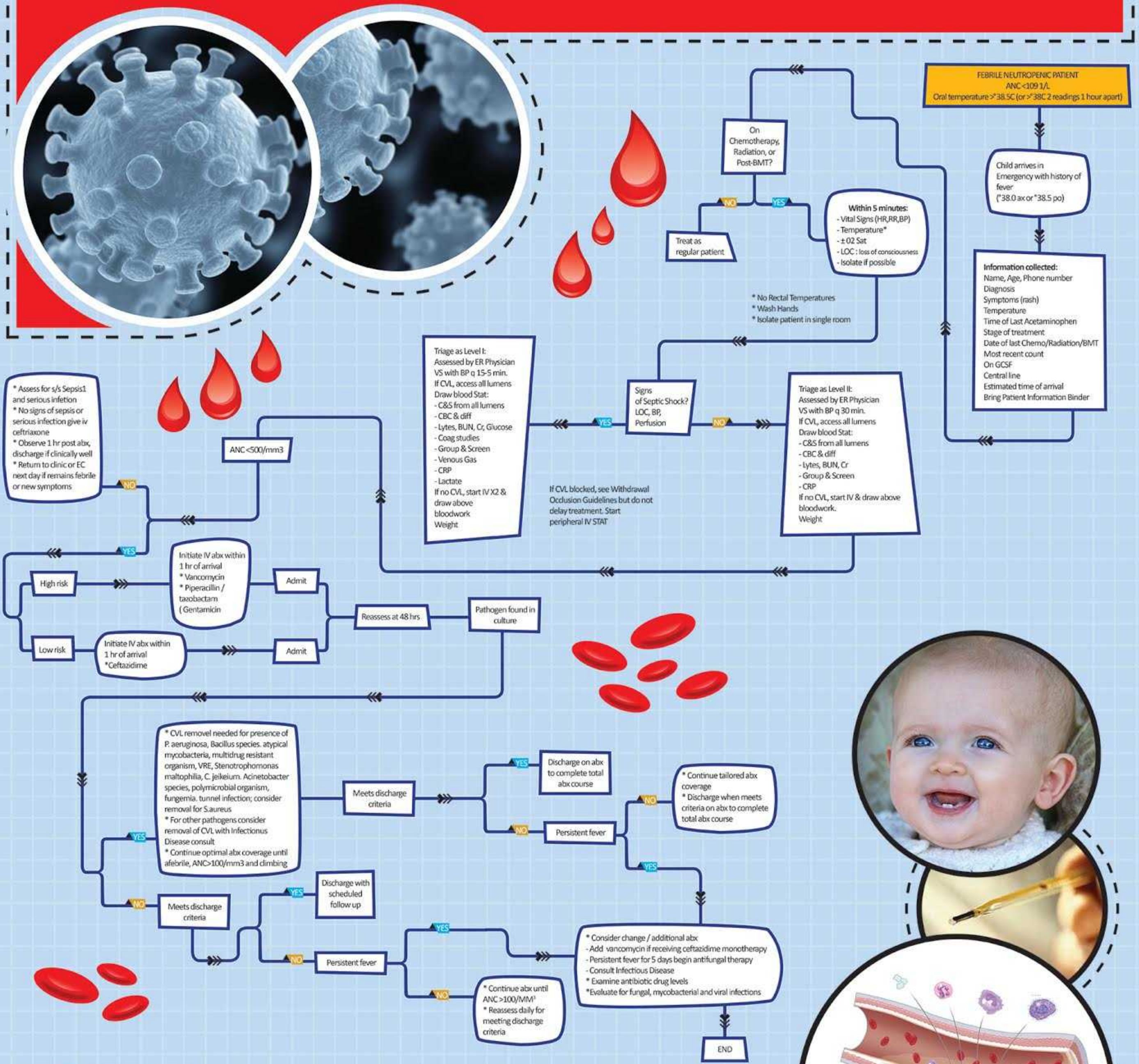


# Management of fever and neutropenia in pediatric oncologic patients



**Sign Changes of Sepsis**

Chills  
Age-specific vital signs

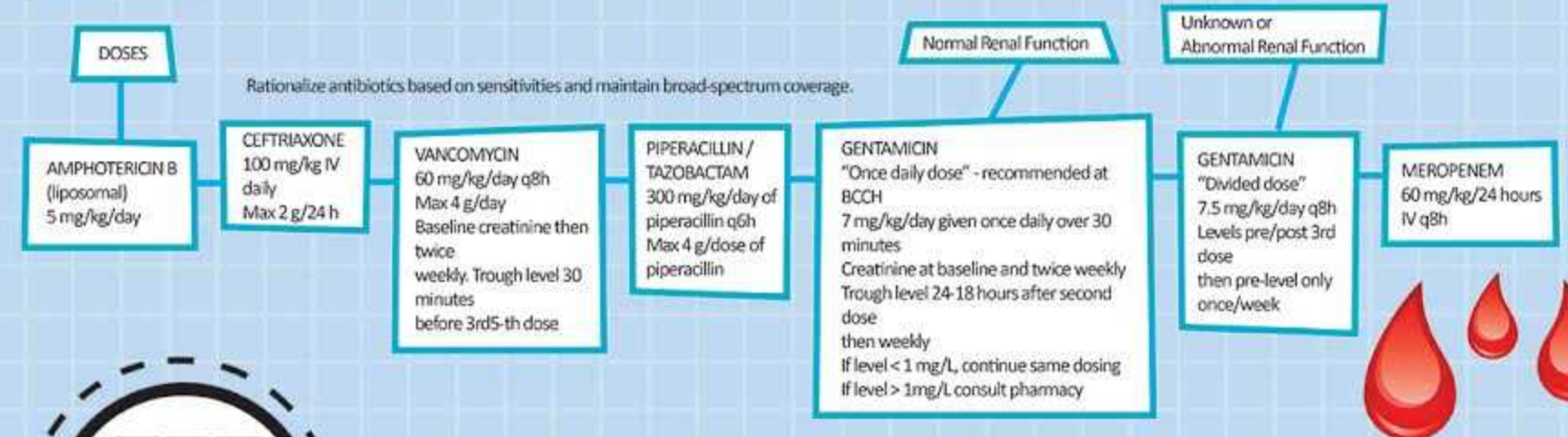
Age	Heart rate/min	Systolic BP
1wk-1m	>180 or <70-100	<70
1m-1yr	>180 or <75-90	<75
1yr-5yr	>74-140	<74
5yr-12yr	>80-130	<80
12yr-18yr	>90-110	<90

Modified from Goldstein B, Giroir B, Randolph A. International pediatric sepsis and organ dysfunction in pediatrics. *Pediatr Crit Care Med* 2005; 8:2(116).

**LOW RISK FEATURES**  
ANC >109 0.5/L  
Platelets >109 20/L  
Clinically well with viral symptoms  
CRP <10 (if available)  
Reliable parents and easy access to return to hospital

**Risk Assessment Criteria**  
Patient is considered High Risk if ANY of the following criteria is present  
\* Signs and symptoms of sepsis  
\* ANC <100/mm<sup>3</sup>  
\* Focal infection (examples include: mucositis, abdominal pain, cellulitis, pneumonia, perianal tenderness)  
\* < 7 days since receiving intensive chemotherapy including: dexamethasone as cancer treatment  
\* Infant ALL, ALL/Lymphoma during any phase other than maintenance, AML, relapse

**Discharge Criteria**  
\* Afebrile ≥ 24 hr  
\* Negative BC for 48 hrs  
\* No signs of focal infection  
\* ANC >100/mm<sup>3</sup> and climbing  
\* Performance scale score at baseline  
\* 24 hr caregiver available at home, able to take temperature, live within 1 hr from accessible medical care, phone and transportation access



Evidence-Based Decision Support Team, Quality and Outcomes Center,  
Texas Children's Hospital, April 2008  
BC Children's Hospital Oncology/Hematology/BMT Dept. Oncologic Emergencies - Fever & Neutropenia Guidelines, April 2012  
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Best Regards,  
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