



¹ Exclusion Criteria

- Post Bone Marrow Transplant (BMT)
- Concern for Sepsis

² CIP/Initial Labs/Diagnostics

- ED CIP:**
1. CBC with diff
 2. Reticulocyte Count
 3. Blood Culture
 4. Draw and hold pink and green top tube
 5. UA and Urine Culture if symptoms of UTI.
See ED CIP
 6. CXR-2V if cough/chest pain

- Clinic CIP:**
1. CMP
 2. Reticulocyte Count
 3. Blood Culture
 4. Draw and hold pink top tube
 5. UA if symptoms of UTI

Initial Evaluation and Monitoring

- Identify risk factors present (CVL, Surgical Splenectomy)
- Supplemental O2 if sats ≤ 93%
- Any focal infection
- Spleen size (compare with baseline exam)

³ High Risk Factors

- Central Venous Line (CVL)
- History of surgical splenectomy

⁴ Additional Labs/Diagnostics

- Consider:**
- BMP, if concern for dehydration
 - Chest X-ray, if respiratory symptoms, hypoxia or chest pain
 - UA, urine culture if not toilet trained or concern for UTI
 - Type and Screen if splenomegaly
 - Respiratory Viral Panel, if any respiratory symptoms during seasonal viral outbreaks



Discharge Medications

Discharge Medications					
Localizing Source	Treat the source of fever as appropriate. Refer to the guidance for Antimicrobial Stewardship for otherwise healthy children with common conditions				
Non-Localizing Source	For standard risk patients stable for discharge after IV Ampicillin, an additional 2 doses of oral Amoxicillin (at q8h interval) are required to continue empiric antibiotic coverage for a full 24-hour period (Max dose 1000mg per dose). Give 1st dose at home 8 hrs after IV dose in hospital.				
	Body weight	Amoxicillin dose	Amoxicillin daily dose equivalent (mg/kg)	Number of tablets per dose	Total number of tablets to be given at discharge
	7.5-10kg	250mg	75-100	1	2
	10.1-14kg	375mg	80-111	1.5	3
	14.1-19kg	500mg	78-106	2	4
	19.1-25kg	750mg	90-117	3	6
	≥25.1kg	1000mg	≤120	4	8
	*If Penicillin allergy, give prescription for Clindamycin 10 mg/kg/dose (Max single dose 600 mg) q8h for 2 doses.				
	Note: High risk patients age ≥5 years who receive IV LevoFLOXacin and meet discharge criteria do NOT need additional discharge medication as LevoFLOXacin provides 24-hour coverage				
Additional Agent	Oseltamivir (Tamiflu) PO				
	Recommended for patients with flu-like symptoms during seasonal influenza outbreaks. Start within 2 days of symptoms (Max dose 75mg per dose)			Start	
	Age	Body Weight	Dose	Dose Frequency	
	0-12 yo	≤15kg	30mg	BID x5 days	
		16-23kg	45mg	BID x5 days	
		24-40kg	60mg	BID x5 days	
		>40kg	75mg	BID x5 days	
	≥ 13 yo	75kg	75mg	BID x5 days	