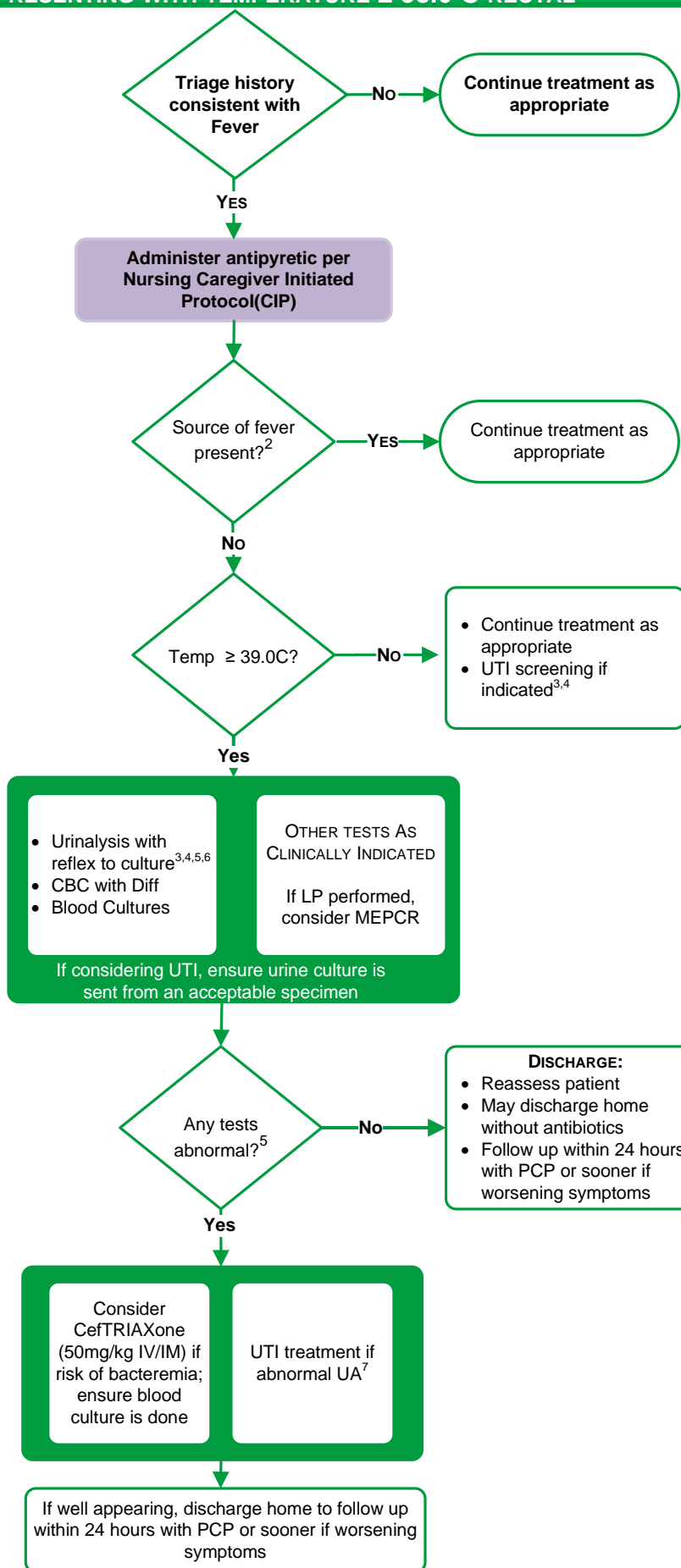




PRESENTING WITH TEMPERATURE ≥ 38.0 C RECTAL



EXCLUSION CRITERIA

- Toxic appearance
- Underlying immunodeficiency
- Chronic disease
- Currently on antibiotics
- Immunizations with in 48 hrs
- Presenting with seizure
- Petechiae
- Unreliable social situation

²SOURCE OF FEVER

- Well defined viral illness (e.g., bronchiolitis, varicella, gingivostomatitis, herpangina, etc.)
- Specific bacterial illness (e.g., otitis media, etc.)
- Well defined bacterial infections (eg, pneumonia, localized infection/ cellulitis, etc.)

³UTI RISK FACTORS

- | | |
|---|--|
| Females: | Males: |
| <ul style="list-style-type: none"> • Age < 12 months • Temperature $\geq 39.0C$ • Fever ≥ 2 Days • Absence of another source of infection | <ul style="list-style-type: none"> • Temperature $\geq 39.0C$ • Fever > 24 hours • Absence of another source of infection |

⁴PROBABILITY OF UTI

Number of Risk Factors Present		Probability of UTI
Circumcised Male	Female	
≤ 2 risk factors	≤ 1 risk factor	$\leq 1\%$
≤ 3 risk factors	≤ 2 risk factors	$\leq 2\%$

In uncircumcised male, probability exceeds 1% even with no risk factors

⁵ABNORMAL LAB TESTS

- Abnormal UA:**
- >9 WBC hpf (high power field) or
 - Nitrites positive or
 - LES $\geq 2+$
- If considering UTI, ensure urine culture is sent from an acceptable specimen
- Risk for bacteremia:**
- WBC $\geq 20,000$
 - Absolute Neutrophil Count $\geq 10,000$

⁶URINALYSIS WITH REFLEX TO CULTURE

- Urinalysis will reflex to culture if:
- WBC>9 or
 - Nitrite positive or
 - LES $\geq 2+$

⁷UTI TREATMENT

- Inpatient therapy if:**
- Ill appearing
 - Persistent vomiting
 - Unreliable family situation
- Outpatient therapy:**
- Antibiotic options based on local pathogens and sensitivities
 - Cephalexin 25mg/kg/dose TID x 10 days is drug of choice
 - Alternative is 2nd generation cephalosporin, Cefprozil 15mg/kg/ dose BID if there is concern with compliance with TID dosing
 - Consider 1st dose of antibiotic (cephalexin) before discharge