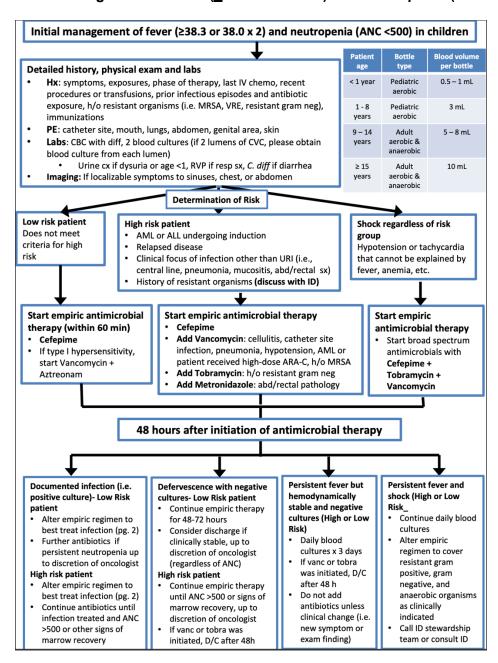


PEDIATRIC FEBRILE NEUTROPENIA GUIDELINE

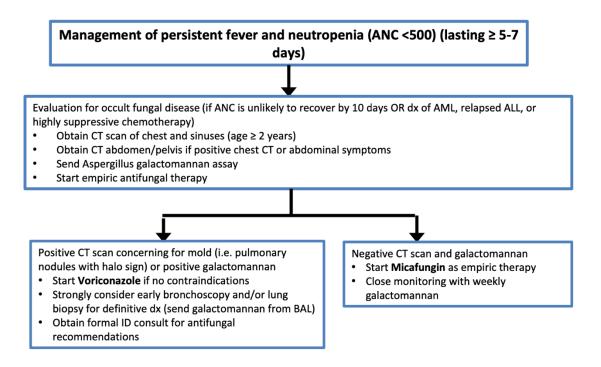
Initial management of fever (>38.3 or 38.0 x2) and neutropenia (ANC <500) in children



Modification of empiric regimen in setting of documented infection

| Documented infection | Modification of empiric regimen | | |
|------------------------------|---|--|--|
| Gram positive bacteremia | Add vancomycin until susceptibilities available; Consider ethanol lock x 5 days if broviac (not port). | | |
| Gram negative bacteremia | Add tobramycin until susceptibilities available; Consider ethanol lock x 5 days if broviac (not port). Consider line removal if Pseudomonas . | | |
| Pneumonia | Consider addition of vancomycin if MRSA suspected. | | |
| Neutropenic enterocolitis | Add metronidazole. | | |

Management of persistent fever and neutropenia (ANC < 500) (lasting > 5-7 days)



Antimicrobial dosages and monitoring parameters

| Antimicrobial agent | Dose | Monitoring parameters | Trough level |
|---------------------|--|---|--|
| Cefepime | 5 0mg/kg/dose IV q8h (max 2000 mg/dose) | • CBC | N/A |
| Meropenem | 20 mg/kg/dose IV q8h (max 1000 mg/dose) | • CBC | N/A |
| Metronidazole | 10 mg/kg/dose q8h (max 1500 mg/day) | | N/A |
| Micafungin | 1.5-3 mg/kg IV once daily (max 150 mg/dose) | Renal function, LFTs | N/A |
| Tobramycin | 2.5 mg/kg/dose Q8H Note: ≥ 18 years old, consider extended interval dosing (may call pharmacy for guidance) | Renal function | Peak drawn 1 hour from start of infusion of the 3rd dose Trough drawn 30 minutes prior to 4th dose Goal peak: 6-8 mcg/mL Goal trough: 0.5-1 mcg/mL |
| Vancomycin | 15 mg/kg/dose q6h (max 4000 mg/day) | Renal function | Trough prior to 4th dose Goal trough: range is 10- 20 mcg/mL (discuss with pharmacy) |
| Voriconazole | Age < 2: IV: 9 mg/kg q12h PO: 9 mg/kg q12h Age 2-11: IV: 9 mg/kg q12h x 2 doses, then 8 mg/kg q12h (max 350mg/dose) PO: 9 mg/kg q12h Age ≥ 12: IV: | LFTs, renal function, electrolytes AEs: visual disturbances, photosensitive rash, encephalopathy | Trough after 5 days Goal: 2-5 μg/mL (trough of 1-2 may be ok) Note: Intermittent therapeutic drug monitoring is warranted |

References

- Cho SY, Lee DG, Choi SM, et al. Impact of vancomycin resistance on mortality in neutropenic patients with enterococcal bloodstream infection: a retrospective study. BMC Infect Dis. 2013 Oct 29;13:504.
- Coyle VM, McMullan R, Morris TC, et al. Catheter-related bloodstream infection in adult haematology patients: catheter removal practice and outcome. J Hosp Infect. 2004 Aug;57(4):325-31.
- Freifeld AG, Bow EJ, Sepkowitz KA, Boeckh MJ, Ito JI, Mullen CA, Raad II, Rolston KV, Young JA, Wingard JR; Infectious Diseases Society of America. Clinical practice guideline for the use of antimicrobial agents in neutropenic patients with cancer: 2010 update by the infectious diseases society of america.
- Han SB, Bae EY, Lee JW, et al. Clinical characteristics, and antimicrobial susceptibilities of viridans streptococcal bacteremia during febrile neutropenia in patients with hematologic malignancies: a comparison between adults and children. BMC Infect Dis. 2013 Jun 17;13:273.
- Lehrnbecher T, Phillips R, Alexander S, et al; International Pediatric Fever and Neutropenia Guideline Panel. Guideline for the management of fever and neutropenia in children with cancer and/or undergoing hematopoietic stem-cell transplantation. J Clin Oncol. 2012 Dec 10;30(35):4427-38.
- Phillips RS, Lehrnbecher T, Alexander S, et al. Updated systematic review and meta-analysis of the performance of risk prediction rules in children and young people with febrile neutropenia. PLoS One. 2012;7(5):e38300.

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