



Febrile Neutropenia Empiric Treatment Clinical Order Set

(Adapted with Permission by IWK Health Centre July-2019)

Patient: _____ Age: _____ Wt: _____kg Date of Wt: _____

Alert Record Reviewed No Allergies Known

ALLERGIES - Adverse Reactions-Cautions: _____

DIAGNOSIS: _____

Items preceded by a bullet (●) are active orders. Items preceded by a checkbox () are only actioned if checked (√)

● Phone pediatric oncologist within 60 minutes of patient arrival. Time consulted _____ hours

Fluids and Nutrition

● D5W + 0.9% NaCl IV at 1.5 x maintenance _____mL/hour (maximum 150 mL/hour) reassess daily.

Monitoring

● Blood pressure, heart rate, RR, O₂ saturation, and temperature q1h until stable, then q4h

Blood work/Microbiology

● CBC with differential, lactate, electrolytes (Na⁺,K⁺) and CREAT, within 30 minutes of arrival

● Blood from all CVL lumens (or peripheral if no CVL) for culture and sensitivity within 30 minutes of arrival and prior to starting IV antibiotics

As clinically indicated:

Urinalysis Urine culture (no PUC samples- all urine cultures must be midstream or catheter only)

NPA for: Influenza/RSV Extended viral panel (ID approval required)

Other: _____

Repeat daily:

● CBC with differential,(Na⁺, K⁺ while receiving daily IV fluids, and daily CREAT if receiving vancomycin or tobramycin)

● Blood cultures from all lumens for culture and sensitivity **if** temperature is greater than or equal to 38°C one hour apart or greater than or equal to 38.3 °C, or if patient appears unwell.

Diagnostic Imaging:

Chest X-ray Other: _____

Medications: Alternate antibiotics through each lumen once daily. All patients should receive antibiotics within 60 minutes or less of arrival as indicated below. Antibiotic doses below may require adjustment for renal function.

STABLE:

If NO penicillin allergy:

piperacillin-tazobactam _____ mg IV q8h (80 mg/kg/dose, max: 4000 mg/dose)
(Dosing based on piperacillin component)

If penicillin allergy:

ceFEPIME _____ mg IV q8h (50 mg/kg/dose, max: 2000 mg/dose) **OR**

ceftazidime _____mg IV q8h (50 mg/kg/dose, max: 2000 mg/dose) **AND** vancomycin (see dosing below)

UNSTABLE: patients and those requiring the addition of vancomycin (see reverse for more reference) and

If ceFEPIME unavailable for penicillin allergy **ADD** the following (**to be started immediately after blood cultures drawn**):

vancomycin _____mg IV q6h (less than 12 years of age: 12.5 mg/kg/dose, max: 1000 mg/dose)

vancomycin 1000 mg IV q12h (equal to or greater than 12 years of age)

● Vancomycin- Pre (trough) level pre 4th or 5th dose

AND (if patient is UNSTABLE)

tobramycin _____mg IV q24h (equal to or less than 6 years of age: 10 mg/kg/dose, max: 400 mg/dose pre-level)

tobramycin _____mg IV q24h (older than 6 years: 8 mg/kg/dose, max: 400 mg/dose pre-level)

● Tobramycin- Post (peak) level 30 minutes after first infusion complete.

DATE (dd/mm/yyyy) Time (24hr/hh:mm) Prescriber Signature Printed Surname/Registration#

DATE (dd/mm/yyyy) Time (24hr/hh:mm) Verified By (Signature) Printed Surname



Febrile Neutropenia Orders and Algorithm (Do Not Scan to Pharmacy)

