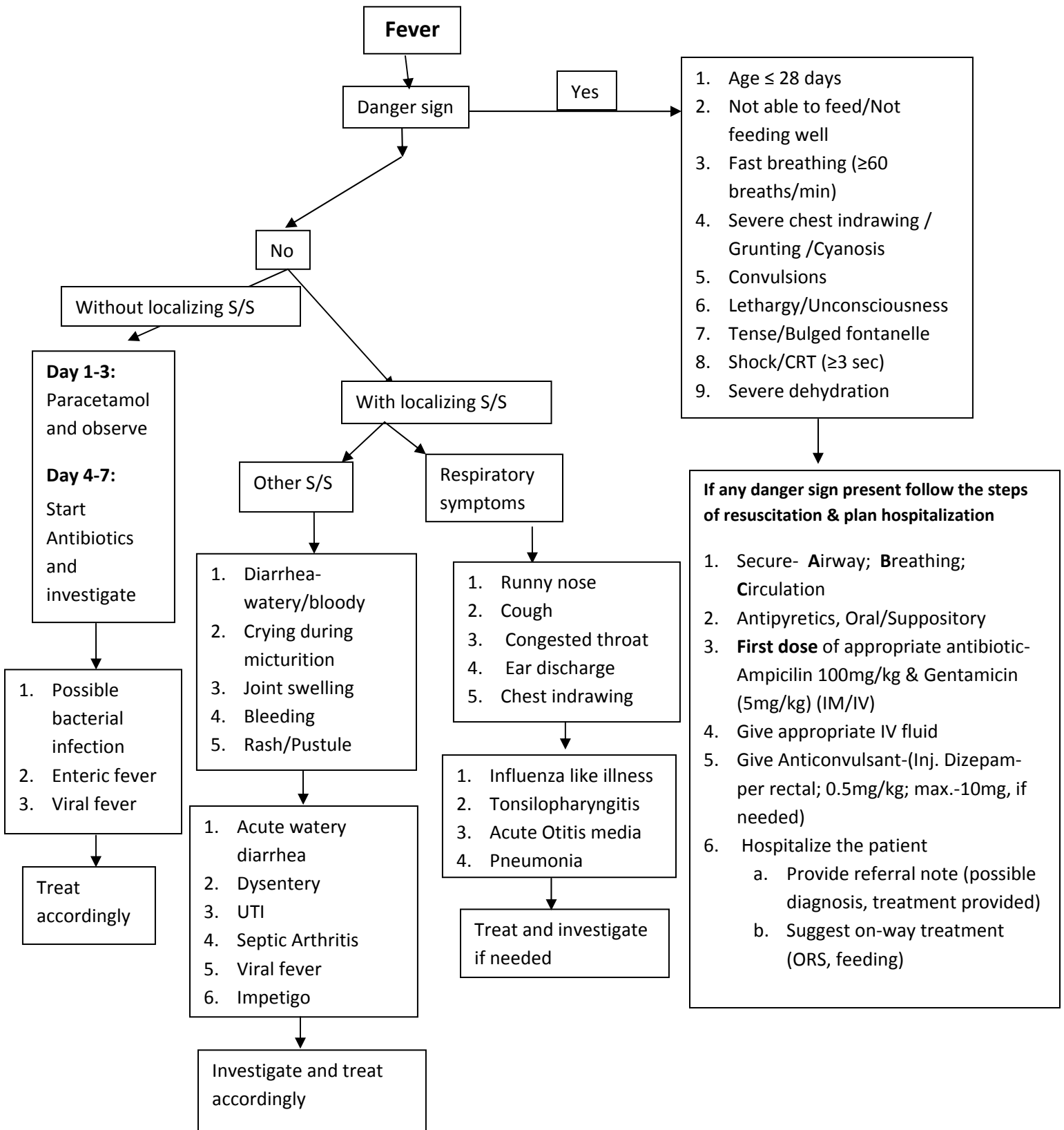


Acute Febrile Illness in children- (Age- 1 day up to 2 months)



Tips for management of Acute Febrile Illness (Age- 1 day up to 5yrs)

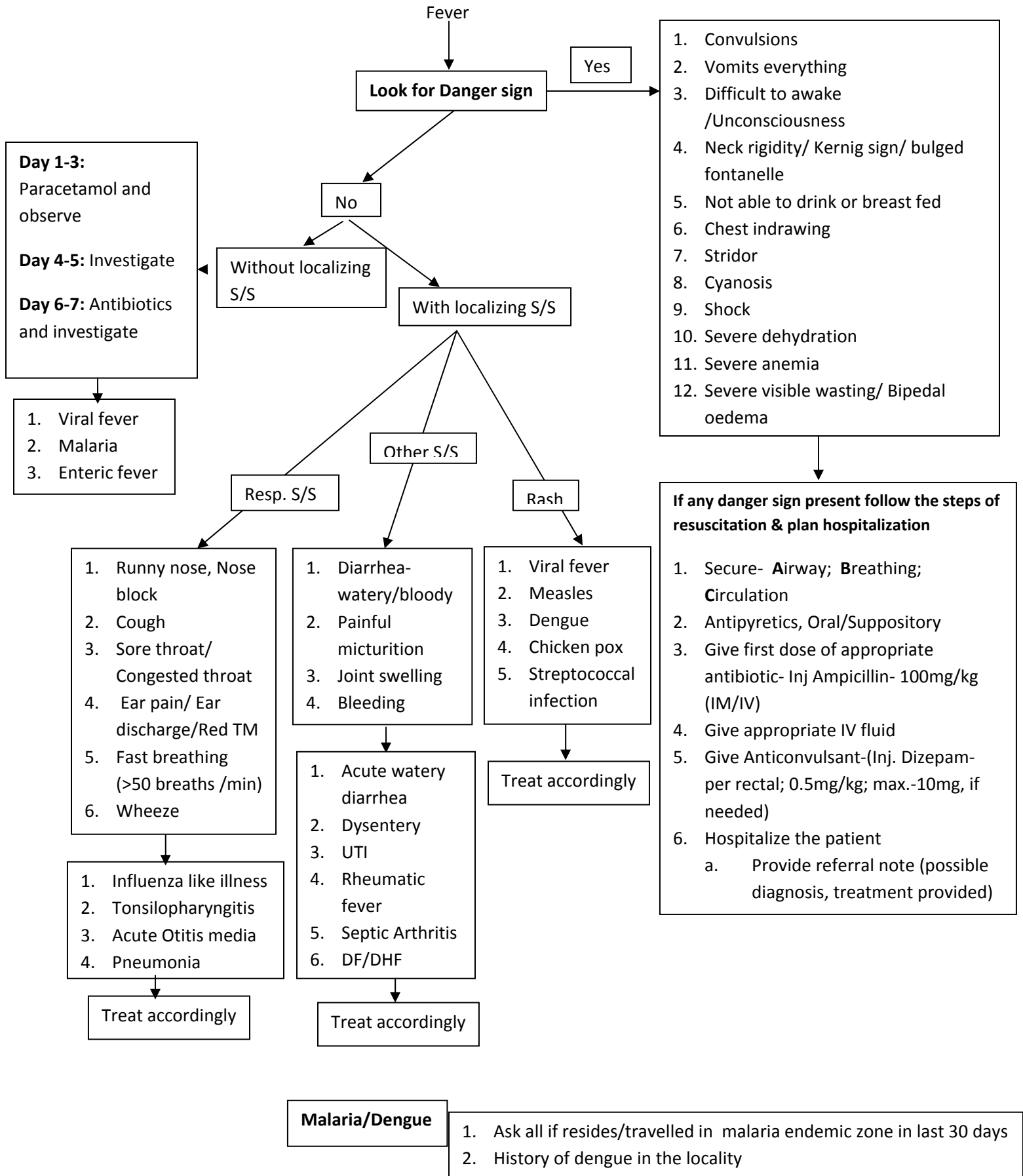
A. Investigation:

1. On day 1-3:
 - a. In patient without focus : Not needed; MP or RDT in patient from malaria endemic zone
 - b. In patient with focus (as needed): CBC,PBF, MP or RDT for malaria, CXR, Urine R/E & C/S, throat swab-C/S
2. On day 4-5:
 - a. In patient with or without focus (as needed): CBC, PBF, MP or RDT for malaria, CXR, Blood C/S, Urine R/E & C/S, throat swab-C/S
3. On day 6-7:
 - a. All patients (as needed): CBC,PBF, MP or RDT for malaria, CXR, Blood C/S, Urine R/E & C/S, Widal test, Anti-dengue antibody, Throat swab-C/S

B. Treatment:

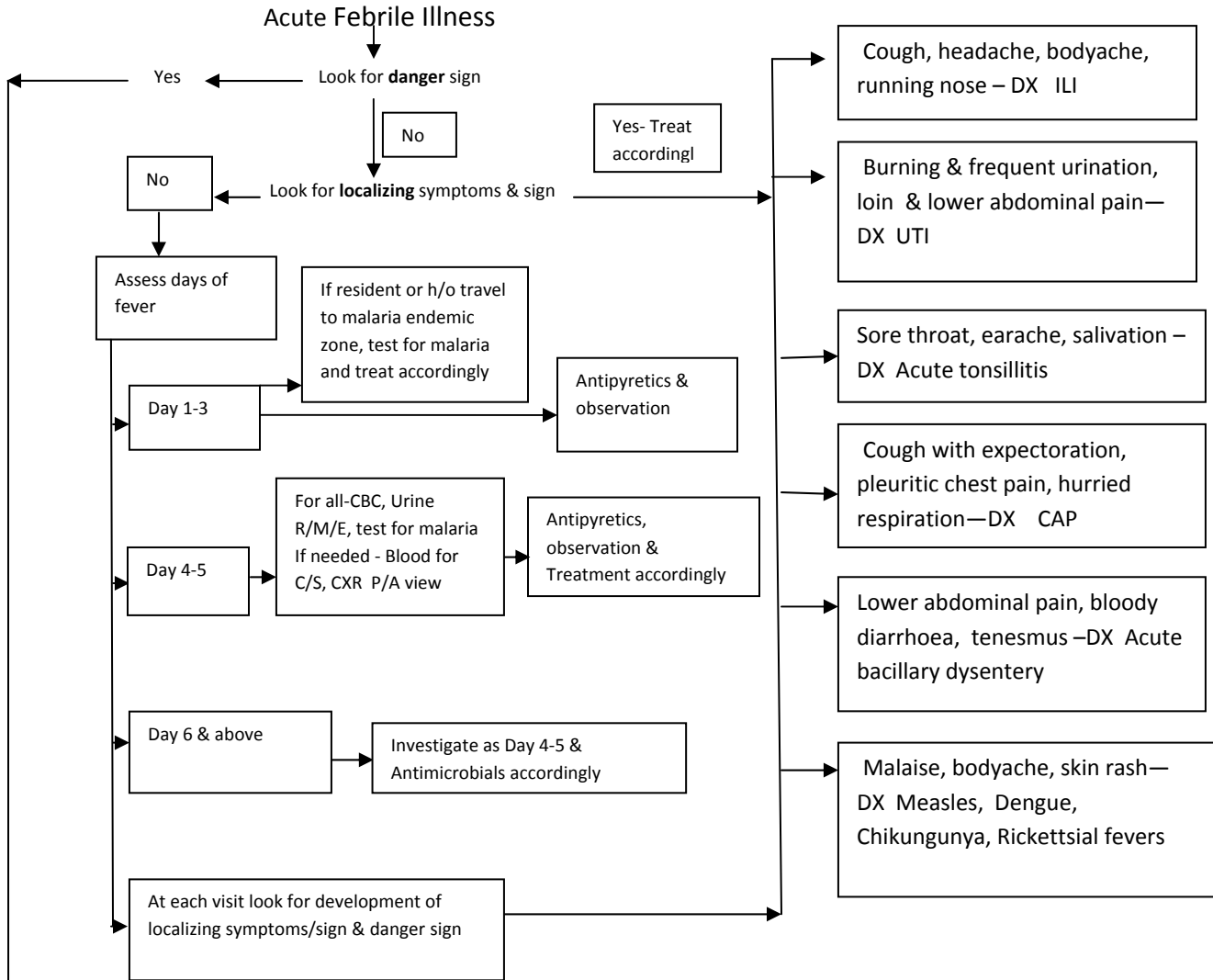
1. Antipyretics (Paracetamol):
 - a. Paracetamol (15mg/kg/dose, 4-6 hourly, max. 4 doses if temperature is $\geq 101^{\circ}\text{F}$). Efficacy is same for oral and suppository formulation
 - b. Sponging with luke- warm water (not with ice cool water)
 - c. Avoid NSAID in suspected dengue infection
 - d. Aspirin must be avoided in children as antipyretic (can cause Reye syndrome/hepatic failure)
2. Antibiotics:
 - a. Give empiric antibiotic if fever ≥ 6 days
 - b. Pneumonia, tonsillitis - Amoxycillin (30-50mg/kg/day 8 hourly) for 5-10 days
 - c. Typhoid- Azithromycin, Ciprofloxacin, Ceftriaxone for 7-14 days
 - d. **First dose** of appropriate antibiotics in child (2mon up to 5 yrs) with danger sign: Inj. Ampicillin/Ceftriaxone/Ceftazidime
3. For viral fever:
 - a. Antipyretics only
 - b. Tab. Diazepam 0.5 mg /kg/day (history with febrile seizure)
 - c. Prophylactic antibiotic not necessary in chicken pox and other viral fever
 - d. Antiviral (Acyclovir) may be given in Herpetic infection
 - e. Antihistamine has little role in viral rhinitis
 - f. Bronchodilator can be used in cough with viral fever
4. IV fluid:
 - a. Diarrhoea- Cholera saline
 - b. Shock- Normal saline- 20ml/kg (bolus or running)
 - c. In Severe PEM: Give very slow infusion

Acute Febrile Illness (Age 2 months to 5 years)



Management Protocol for Acute Febrile Illness (fever <7 days)

Age 5 years and over



Danger sign

1. Impaired consciousness
2. Convulsion
3. Severe dehydration
4. Severe prostration
5. Shock
6. Cyanosis
7. Severe respiratory distress
8. Neck rigidity/ Kernig's sign
9. Hyper pyrexia (Temp >106F)

If any danger sign present follow the steps of resuscitation & plan hospitalization

1. Secure **A**irway, **B**reathing & **C**irculation
2. Antipyretics, Oral/ Suppositories
3. Start appropriate IV fluid
4. Give empiric antimicrobial, IV/IM
5. Anticonvulsant , Inj. Diazepam, 5-10mg IV, IF needed
6. Hospitalize the patient
 - a. Provide referral note (possible diagnosis, treatment provided)
 - b. Suggest on-way treatment