Clinical Guideline for Evaluation/Treatment of Febrile Infant: 29-60 DAYS OF AGE

**INCLUSION CRITERIA:**
- Well-appearing
- Full term gestation (≥37 weeks)
- NO chronic medical conditions
- NO evident source of bacterial infection (eg, cellulitis, omphalitis, septic arthritis, osteomyelitis)
- Temperature ≥38°C (100.4F) at home or healthcare facility
- Mild upper respiratory symptoms without respiratory distress

**HSV MUST BE CONSIDERED THRU 6 WEEKS OF AGE**

**HSV RISK FACTORS**
- Maternal history of genital HSV lesions
- Household contacts with HSV
- Vesicles
- Seizure
- Hypothermia
- Elevated ALT
- Thrombocytopenia
- CSF pleocytosis

**HSV WORKUP**
1. Send HSV Studies:
   - Eye, nose, mouth, rectum swab for PCR
   - Blood HSV PCR
   - Vesicle fluid HSV PCR (if present)
   - CSF HSV PCR
2. Start acyclovir 20mg/kg every 8 hours

- Send urine culture by catheterized specimen if not done
- PERFORM lumbar puncture
- Initiate parenteral antibiotics: Ceftriaxone 50mg/kg every 12 hours
- If CSF pleocytosis is present and there is concern for bacterial meningitis and vancomycin 15mg/kg every 6 hours.
- Observe in hospital

**Reference:**

February 2022