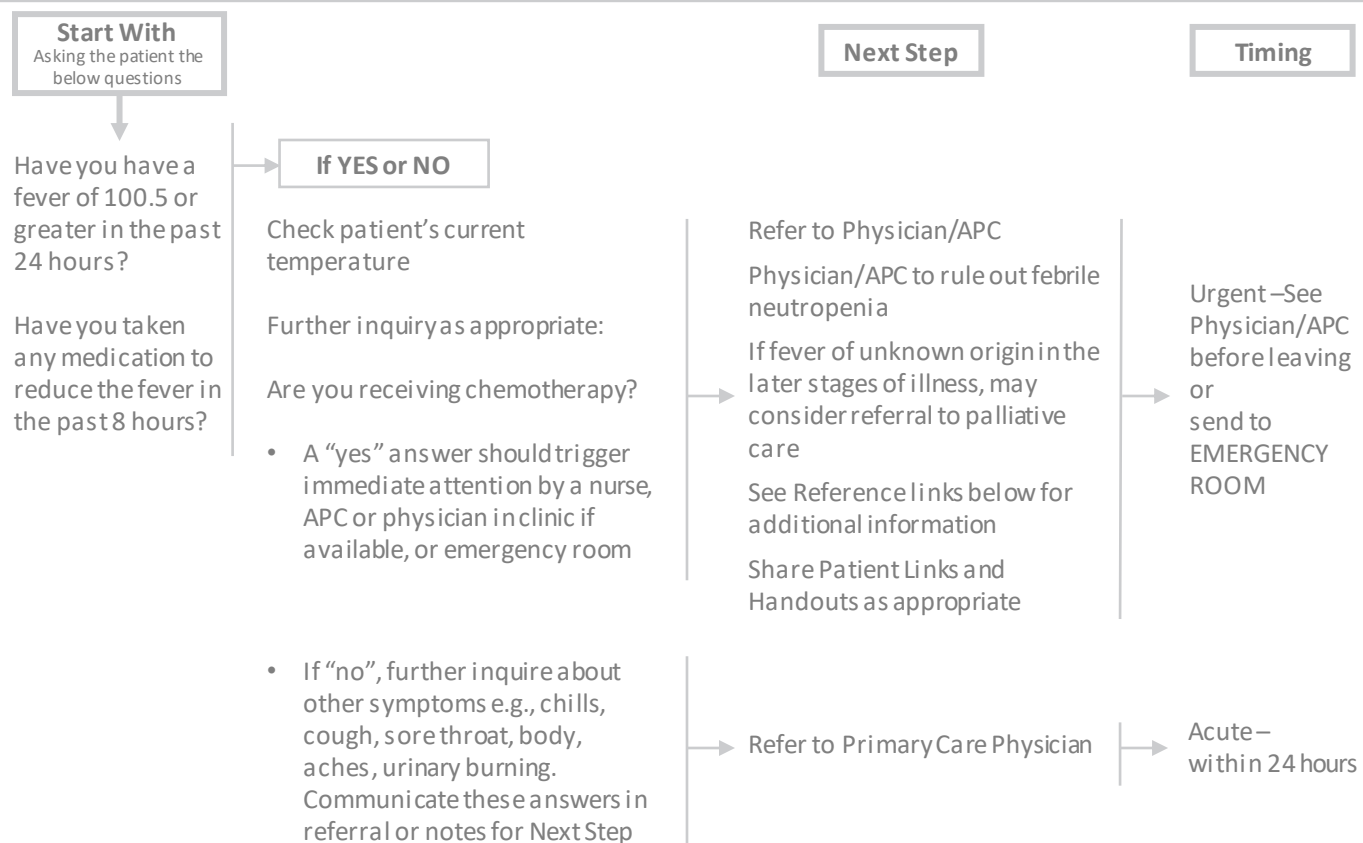


Clinician Follow Up Reference for Supportive Care

Physical Concerns – “YES” to Fevers



Notes

Stages I-III: If patient is undergoing chemotherapy, fever >100.5 may be a sign of a serious life threatening infection. These patients need prompt medical attention to rule out febrile neutropenia. Patients will need a physical examination, blood work (CBC, blood cultures), chest x-ray, urine studies performed. Would not treat fever until after proper evaluation.

Stage IV: Same as above. If determined that persistent fevers are “tumor fevers” due to the cancer itself, patient may receive antipyretics around the clock with a cetaaminophen, NSAIDS or hi-dose steroids.

Geriatric: Temperature of 101 or greater should be immediate/urgent care or if not available, to the ER for evaluation. Older adults have a harder time generating a fever response. Ask about chills and sweats. Fevers in this population should be taken very seriously and need aggressive care. Family and care takers need to be education on the danger of fever in an older person and when to seek medical care. Both flu and pneumonia vaccines are usually recommended, especially with a cancer diagnosis.

Patient Links and Handouts:

- > [American Cancer Society, Fever](#)
- > [CDC, Prepare: Watch out for Fever](#)
- > [NIH, NCI Infection and Neutropenia](#)

CSOC Patient Handout can be accessed at:
<http://cancer-help.me/fever>