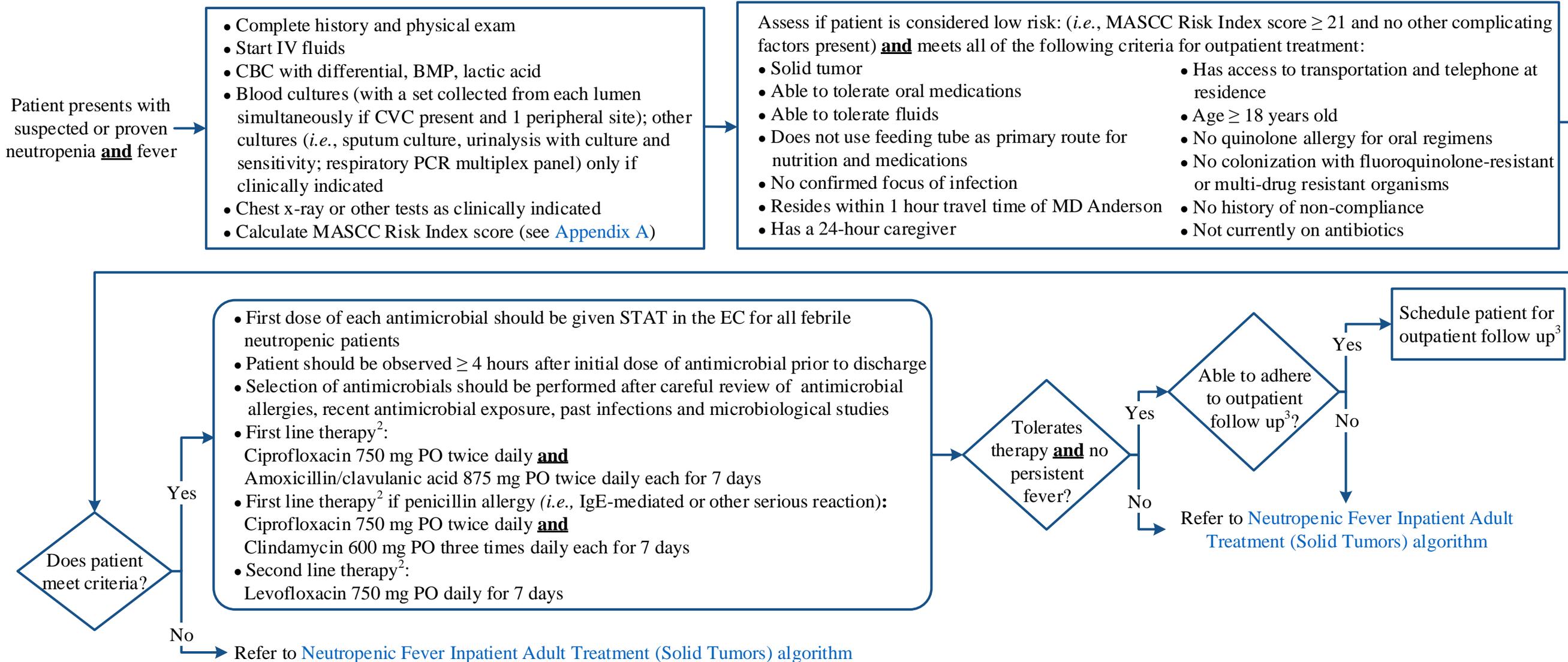


# Neutropenic Fever<sup>1</sup> Outpatient Treatment For Solid Tumor Patients (18 years and older)

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson's specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient's care. Local microbiology and susceptibility/resistance patterns should be taken into consideration when selecting antibiotics. This algorithm should not be used to treat pregnant women.



<sup>1</sup> ANC < 1 K/microliter and temperature  $\geq$  38.3°C **or** equal to 38°C for 1 hour or longer

<sup>2</sup> Doses indicated are for patients with normal renal/hepatic function

<sup>3</sup> See [Appendix B](#): Outpatient Follow up

BMP = basic metabolic panel

MASCC = Multinational Association of Supportive Care in Cancer

NF = neutropenic fever

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## APPENDIX A: Multinational Association for Supportive Care in Cancer (MASCC) Risk Index Score

Characteristic	MASCC Score Weight
Burden of illness: no or mild symptoms	5
No hypotension	5
No chronic obstructive pulmonary disease	4
Solid tumor	4
No dehydration	3
Burden of illness: moderate symptoms	3
Outpatient status	3
Age < 60 years	2

- “Burden of illness” not cumulative
- Patients with score  $\geq 21$  are considered low risk

## APPENDIX B: Outpatient Follow Up

- Schedule outpatient visit for Days 2, 3 and 7; **and** phone follow-up for Days 4, 5 and 6
- Day 2: CBC with differential; repeat creatinine if baseline greater than 1.2 mg/dL
- Day 3: CBC with differential, repeat creatinine
- Day 7: CBC with differential, repeat creatinine **or** phone follow-up if NF has resolved

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## DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Neutropenic Fever experts at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

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