### Fever

For reported or tactile fever that is NOT suspected sepsis. For sepsis, use primary impression Sepsis

#### History
- Age
- Duration of symptoms
- Maximum temperature
- Past medical history
- Medications
- Immunocompromised (e.g., transplant, HIV, diabetes, cancer)
- Environmental exposure
- Last acetaminophen/ibuprofen/aspirin
- Recent travel

#### Signs and Symptoms
- Warm
- Flushed
- Sweaty
- Chills/rigors

**Associated Symptoms (helpful to localize source)**
- Malaise, cough, chest pain, headache, dysuria, abdominal pain, mental status changes, rash

#### Differential
- Infection/sepsis
- Cancer/tumors/lymphomas
- Medication or drug reaction
- Connective tissue disease (e.g., arthritis or vasculitis)
- Hyperthyroidism
- Heat stroke
- Meningitis
- Overdose/toxic ingestion
- Travel illness (e.g., Malaria, Ebola)

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<p>| E | Temperature measurement |</p>
<table>
<thead>
<tr>
<th>Conside...</th>
<th>Consider, active cooling measures</th>
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<tbody>
<tr>
<td>Blood glucose analysis</td>
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<td>Establish IV</td>
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<td>Cardiac monitor</td>
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<td>Consider, Normal Saline bolus 500ml IV/IO</td>
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<td>Maximum 2L</td>
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- ALOC
- Overdose/Poisoning/Ingestion
- Sepsis

- Notify receiving facility. Consider Base Hospital for medical direction

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**Pearls**
- Rehydration with fluids increases the patient’s ability to sweat and facilitates natural heat loss.
- Consider Ebola and obtain recent travel history.
- When you have a concern for a contagious infectious disease (i.e., measles, SARS, Ebola), contact your supervisor.