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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**Temperature measurement**
Consider, active cooling measures
Blood glucose analysis
Establish IV
Cardiac monitor

**Consider**, Normal Saline bolus 500ml IV/IO
*Maximum 2L*

**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.