

Step-by-step approach valid for febrile infants

July 6 2016



(HealthDay)—The Step-by-Step approach is valid for identifying febrile

infants at risk for invasive bacterial infection (IBI), according to a study published online July 5 in *Pediatrics*.

Borja Gomez, M.D., from Cruces University Hospital in Spain, and colleagues conducted a prospective study involving [infants](#) aged ≤ 90 days with fever without source presenting in 11 European pediatric emergency departments. They compared the accuracy of the Step-by-Step approach, the Rochester criteria, and the Lab-score for identifying patients at low risk for IBI.

The researchers found that 4 percent of the 2,185 infants were diagnosed with IBI. Infants classified as high risk or intermediate risk by the Step-by-Step approach had significantly higher prevalence of IBI than those classified as low risk. For ruling out an IBI, the sensitivity and negative predictive value were 92 and 99.3 percent, respectively, for Step-by-Step; 81.6 and 98.3 percent, respectively, for the Rochester criteria; and 59.8 and 98.1 percent, respectively, for the Lab-score. Misclassification occurred in seven, 16, and 35 infants with an IBI with the Step-by-Step approach, Rochester criteria, and Lab-score, respectively.

"We validated the Step-by-Step as a valuable tool for the management of infants with fever without source in the emergency department and confirmed its superior accuracy in identifying patients at low risk of IBI, compared with the Rochester criteria and the Lab-score," the authors write.

More information: [Abstract](#)

[Full Text \(subscription or payment may be required\)](#)

[Editorial \(subscription or payment may be required\)](#)

Copyright © 2016 [HealthDay](#). All rights reserved.

Citation: Step-by-step approach valid for febrile infants (2016, July 6) retrieved 27 April 2024 from <https://medicalxpress.com/news/2016-07-step-by-step-approach-valid-febrile-infants.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.