

Fever

Designation of Condition: Fever is a natural body response primarily to infection, but should last a relatively short period of time. It is important to distinguish fever from an infection vs. hyperthermia from environmental exposure, or even malignant hyperthermia from certain medications or illicit drugs. In environmental or malignant hyperthermia, or in extreme fever associated with infection (>105° F), proceed with aggressive cooling measures.

Temp > 100.4°F

Universal, Contact, Droplet, and/or Airborne Precautions, as indicated
Take a thorough and complete history of any recent travel or sick contacts; follow any/all current EMS system guidance based on this history

ABC's
Vital signs including tympanic temperature
Encourage drinking fluid if able to swallow

Passive cooling
Remove clothing/blankets. Turn heat down in ambulance. **DO NOT** induce shivering

B

For pediatric patients with fever due to suspected infectious cause, acetaminophen (Tylenol and other commercial preparations) in liquid form may be administered per the label's instructions. Patient must be alert, have a gag reflex and not be allergic to acetaminophen.

Pediatric: Administer [Acetaminophen](#) 15 mg/kg PO
Note: ALL pediatric Tylenol formulations come in 160mg/5ml
or
Adults: Administer [Ibuprofen](#) 400– 600 mg PO

IV/IO If signs of dehydration or shock present

Adult: Fluid bolus of 500ml, repeated as needed to a max of 20ml/kg
[Ibuprofen](#) 400– 600 mg PO
[Ketorolac](#) 15mg IV/IO/IM** AAS EMT- I Special Skill

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Pediatric: Fluid bolus 20 ml/kg until improvement in mentation or end organ perfusion
[Pediatric > 1 year Ketorolac](#) 1 mg/kg IM max of 15 mg OR 0.5 mg/kg IV/IO max of 15 mg

For adults, administer [Acetaminophen](#) 1 gm PO

P

Can also consider [Ibuprofen](#) 400–600 mg PO or, If pt complaint of nausea or dyspepsia with PO NSAIDs, [Ketorolac](#) 15mg IV/IO/IM. Treat febrile seizures with [Midazolam](#) 1–5 mg IV/IO/IM/IN to a max of 10 mg

KEY POINTS

Do not use [Ketorolac](#) and [Ibuprofen](#) together.

NSAIDs ([Ketorolac](#) (Toradol) and [Ibuprofen](#)) should not be used in the setting of environmental heat emergencies. NSAIDs should not be used in patients with known renal disease or renal transplant, in patients who have known drug allergies to NSAID's (non-steroidal anti-inflammatory medications), with active bleeding, severe headaches in which intracranial bleeding is suspected, abdominal pain when GI bleeding is suspected, stomach ulcers or in patients who may need acute surgical intervention such as open fractures or fracture deformities. [Ketorolac](#) (Toradol) as per the pain control protocol can be used