Hemophilia EC Clinical Pathway

Fever and CVAD

Do not give NSAIDs including ibuprofen or ketorolac. No IM injections. Give Clotting Factor before invasive procedures.

Contact
- Contact Hematologist on call: Pediatrics 210-529-2567  Adults 210-203-9684

Rapid Triage
- Brief history and physical exam including: Vital Signs, duration of fever, chills, symptoms associated with portacath access; difficulty or pain with access
- Verify most recent port infection treated in medical record

Laboratory
- Access portacath and draw port blood culture, CBC with differential and BMP
- If clinically unstable, draw peripheral culture

Imaging
- Consider CXR and Portacathogram (CV Cath Repair with port order to IR) to assess portacath dysfunction

Antibiotics
- Ceftriaxone 50 mg/kg IV; Max 2 grams
- For cephalosporin allergy, give clindamycin 10-15 mg/kg IV, Max 600 mg
- If hemodynamically unstable or history of MRSA, add Vancomycin 15 mg/kg IV
- **If bleeding, give clotting factor first**
- Do not delay for antibiotic

Antipyretics
- **No NSAIDS**
- Acetaminophen 15 mg/kg po (if not given in the last 4 hrs)

Clotting Factor
- Use patient’s clotting factor from home if available. (Patient Owned Med)
- Factor 8 Deficiency 30 units/kg minor bleed; 50 units/kg major bleed
- Factor 9 Deficiency 50 units/kg minor bleed; 100 units/kg major bleed
- **NovoSeven 90 mcg/kg or FEIBA 75 units/kg**

Disposition
- Admit if recent history of CVAD infection in past 3 months, especially if resistant organism
- Admit if hemodynamically unstable

**For patients with inhibitors, verify in chart which bypassing agent is preferred (NovoSeven or FEIBA).**

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