## Management of Fever in Infants and Children

- 1. Most researchers define fever in infants younger than two months of age as body temperature greater than or equal to:
  - a. 38° C
  - b. 38.2°C
  - c. 98.6° F
  - d. None of the above
- 2. Infants with significant fever who are subsequently proven to have bacterial disease will most frequently be infected in the:
  - a. CSF
  - b. Blood
  - c. Stool
  - d. Urine
- 3. At present, generally recommended management of the infant less than 28 days of age with significant fever includes:
  - a. Culture of blood
  - b. Culture of CSF, cell count, gram stain
  - c. Culture of urine
  - d. Admission and IV antibiotics
  - e. All of the above
- 4. The bacteria most frequently isolated from blood specimens obtained from febrile children aged two-36 months with fever in the ED greater than 39.5° C is:
  - a. Hemophilus influenzae type B
  - b. Meningococcus
  - c. Group A. and B. Streptococcus
  - d. Pneumococcus
- 5. Risk factors for an increased likelihood of UTI in young febrile children include:
  - a. Female
  - b. Uncircumcised
  - c. Fever greater than 39°C
  - d. No obvious fever source on physical exam
  - e. All of the above

- 6. So-called "occult" bacteremia describes a group of well appearing febrile children subsequently found to have unsuspected bacteremia, usually caused by pneumococcus. Which of the following statements about occult bacteremia is false?
  - a. In the majority of children with occult bacteremia, the bacteremia resolves spontaneously and there are no sequelae.
  - b. Occult bacteremia caused by meningococcus can progress to more invasive disease, including meningitis.
  - c. In general, higher peripheral WBC is reflective of increased prevalence of bacteremia.
  - d. Widespread use of the heptavalent pneumococcus vaccine will likely have no impact on the prevalence of occult bacteremia.
- 7. Use of empiric antibiotics in febrile children subsequently found to have bacteremia has been found to definitively reduce risk of invasive sequelae, such as meningitis:
  - a. True
  - b. False
  - c. Seems to depend upon which study you read.
- 8. Overuse of antibiotics in viral illnesses, such as URI's in bronchiolitis, is a major contributor to the development of multiple drug-resistant strains of bacteria:
  - a. True
  - b. False
- 9. Which of the following statements regarding the heptavalent pneumococcal vaccine is <u>true</u>?
  - a. The vaccine is routinely recommended only for patients with immune deficiency, sickle cell disease, asplenia and malignancy.
  - b. The current vaccine offers > 75% protection against pneumococcal illness in US children.
  - c. Since < 5% of pneumococcal isolates are resistant to penicillin, widespread vaccination of infants is not an urgent public health priority.
- 10. Educating parents about fever should include the following:
  - a. Fever is a normal response.
  - b. Fever is a symptom, not a disease.
  - c. Assume a calm approach to fever
  - d. Fever is often a useful body defense.
  - e. Fever need not always be treated.
  - f. Clinical appearance is usually more important than the height of the fever.
  - a. All of the above.