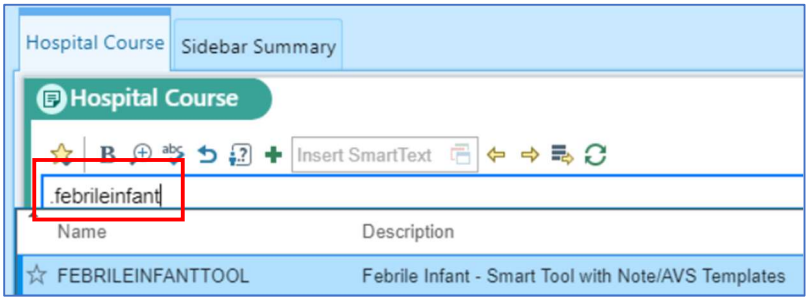
Tip Sheet for Using the Febrile Infant Smart Tool (.febrileinfanttool)

This tip sheet will describe the basic steps to using this dotphrase "smart tool" and highlight some of the features designed to expedite note writing and improve communication.

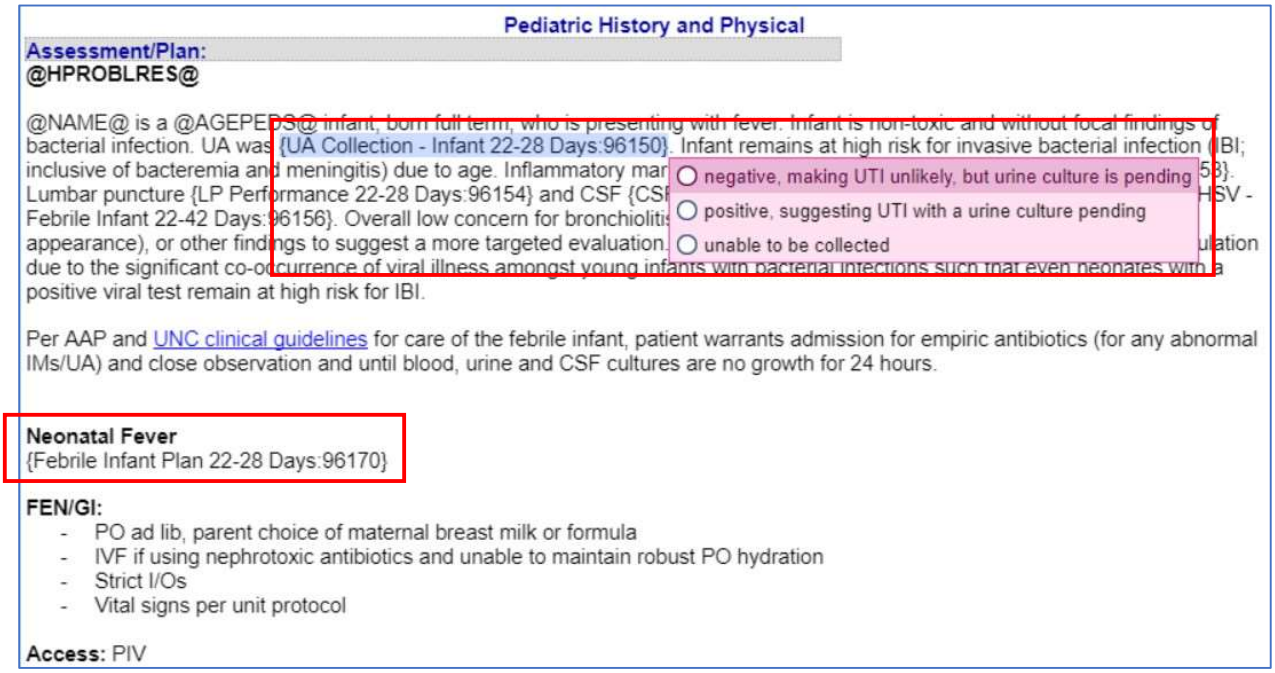
1. If you don't already have access, email alex_ahearn@med.unc.edu
   NOTE: Should be available to all ED, PHM and resident providers, but new providers may need to be added ad hoc; will move to a more sustainable "system smart phrase" when no further improvements are anticipated

2. Type ".febrileinfanttool" in any free text field (notes, hospital course, discharge information, etc.)

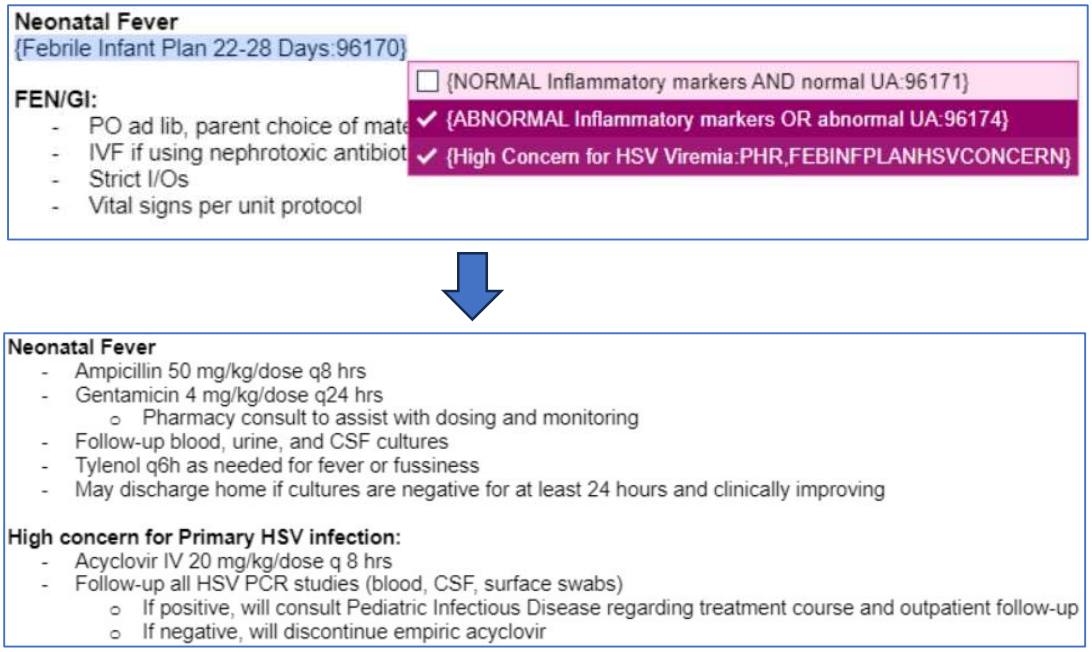


3. The tool organizes dotphrases for an H&P, assessment and plans and AVS information (inclusive of patients discharged from inpatient and the ED/UC)

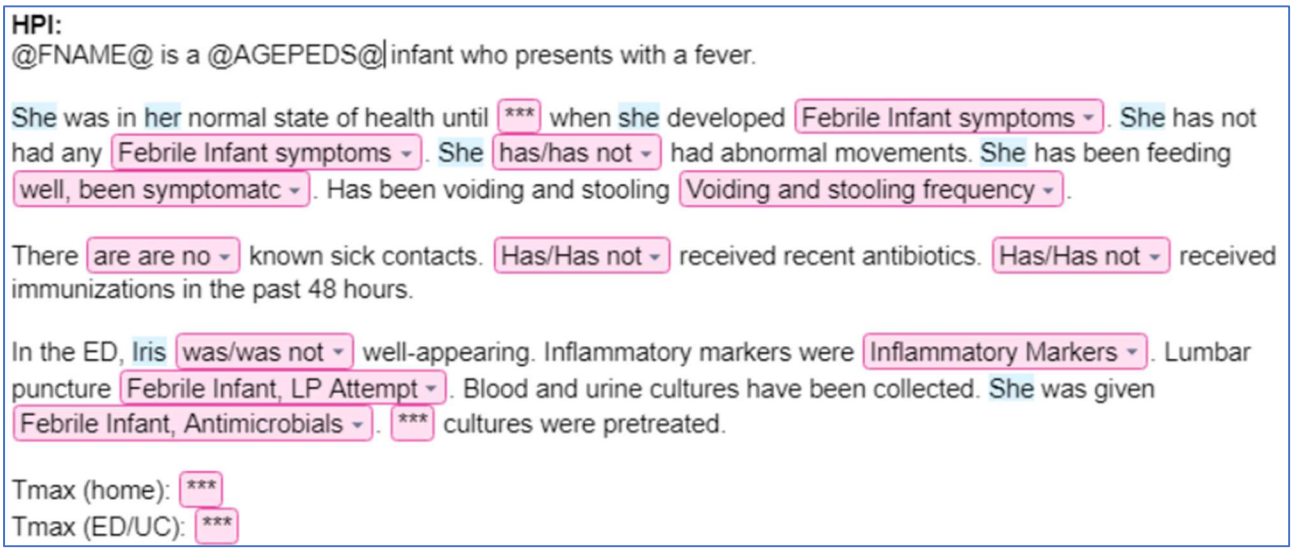
4. Dotphrases provide auto-generated smart text where possible and pre-fill recommendations based on inputs of patient-specific clinical details



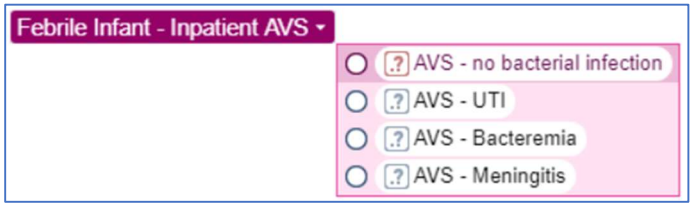
5. The dotphrase will likewise list the pathway-recommended antimicrobials / plans based on the patient inputs selected

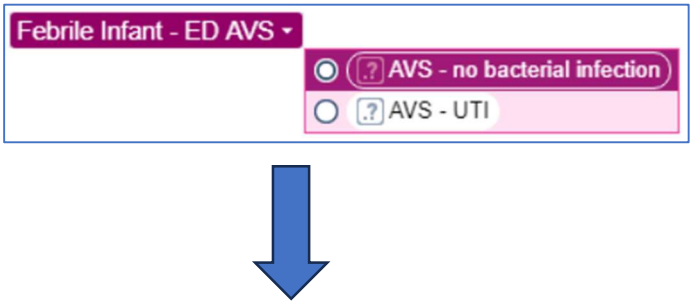


6. Some providers may prefer not to tab through the dotphrase smart lists in narrative sections, like the HPI. However, the text is still useful for prompting providers on the key components of the history.



7. The AVS section includes fully templated family-facing information that also aims to offer standard information to their outpatient providers on the plan of care.





Your baby was seen in the emergency department for fever (temperature 100.4 F or higher).

Fevers can be due to infection. Most infections are caused by a virus, which requires no special treatment and children will typically feel better in a few days. Less often, an infection is caused by bacteria and needs antibiotics. The immune system that protects our bodies from infection is not as strong in young babies. For this reason, young babies with a fever are at higher risk of a serious infection and need to be seen by a doctor.

Based on your child's test results and exam, we are reassured that their fever is *unlikely* to be caused by a serious bacterial infection. Very rarely, a culture (test looking for infection) will "turn positive" (grow bacteria) after 24-72 hours. If this happens, someone from the hospital will call you and your child's primary care provider.

Your child does NOT require hospitalization or treatment with home antibiotics at this time. It is still important that your child is seen by their primary care provider in the next 24 hours to make sure they continue to do well.

Please seek immediate medical attention if your child:
- Continues to have fevers for 5 or more days
- Stops feeding
- Is vomiting and unable to tolerate feeding
- Has fewer than 4 wet diapers in a day, is no longer making tears when crying, or shows other signs of dehydration
- Develops difficulty breathing (breathing very fast or very hard where you can see their ribs)
- Becomes difficult to wake up or is so irritable that he or she cannot be soothed