


NHS FORTH VALLEY

Patients Receiving Chemotherapy Who Become Unwell: Guidance for Community Healthcare Practitioners



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Consultation and Change Record

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Date	Author	Change	Version
19.11.13	F Galbraith	Definition of Neutropenia – Neutrophil count changed from $<1.0 \times 10^9/L$ to $<0.5 \times 10^9/L$ Change to management pathway (page 4) to reflect current UKONS Triage Tool and NHS FV Neutropenic Sepsis Guideline – Secondary Care	2.00

Policy Statement

Cancer patients receiving chemotherapy are at risk of infection because both disease and treatment can compromise the host defences. The risk of infection is directly related to the depth and duration of neutropenia. Patients most at risk are those with a prolonged (>48 hours) neutrophil count of $<0.5 \times 10^9/L$.

Note: Neutropenia alone is not a reason for admission to hospital. If patient is afebrile and asymptomatic they should remain at home and be advised to report promptly to the GP if they become unwell.

Definition of Neutropenic Sepsis:

- Neutrophil count $<0.5 \times 10^9/L$

AND Temperature of $>38^{\circ}C$

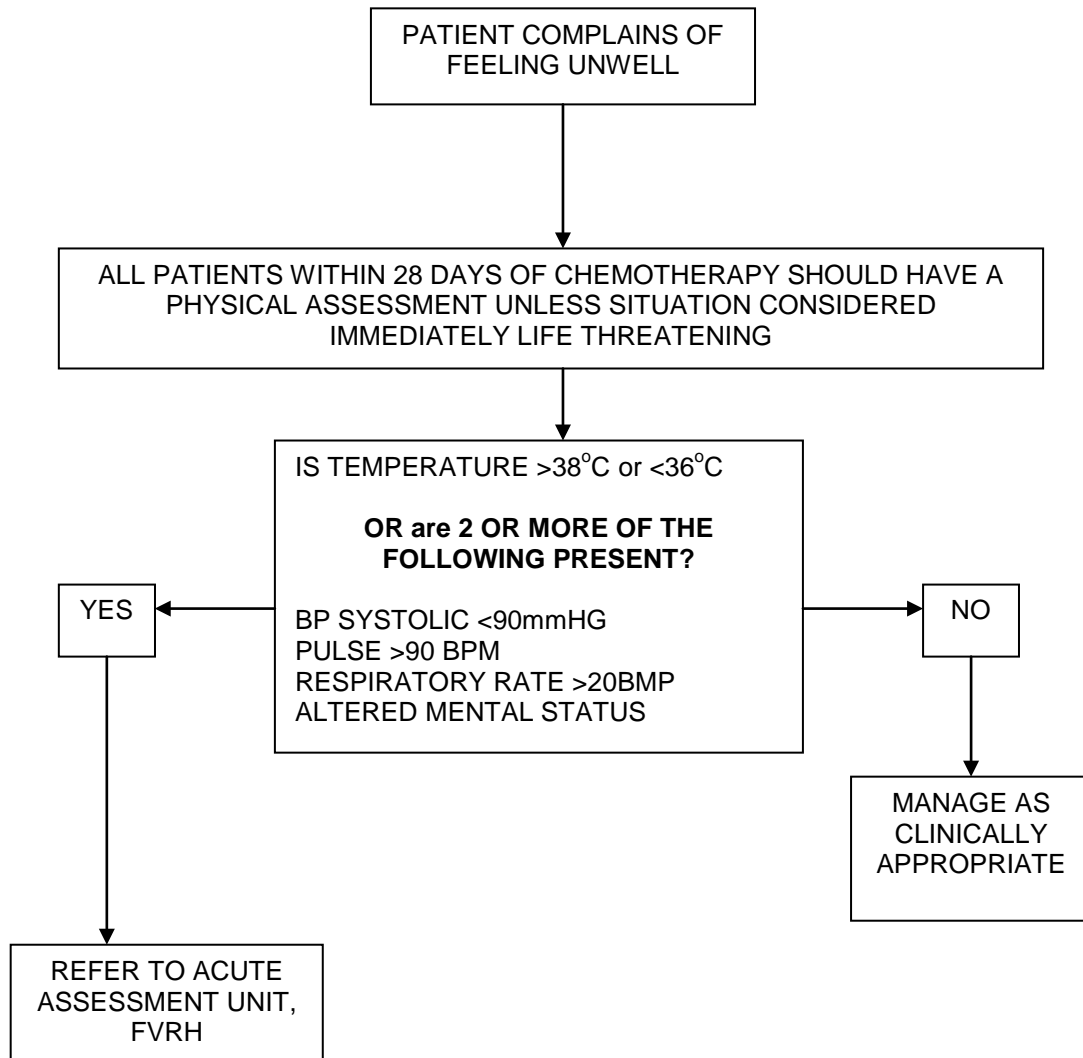
OR Clinical signs of septicaemia (tachycardia, hypotension, increased respiratory rate, rigor, altered mental status, hypothermia)

Clinical Presentation:

Fevers may be mild, but a history of rigors is extremely important and suggests bacteraemia. The presence of neutropenia alters the inflammatory response, potentially masking the source of infection. Acutely unwell patients may be apyrexial - hypothermia can indicate severe sepsis with a poor prognosis. Hypotension may be a sign of sepsis in patients who are unwell but apyrexial.

Neutropenic Sepsis is a life-threatening medical emergency

Management of Unwell Patients Receiving Chemotherapy



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