

Appendix D: Home Based Care for Febrile Neutropenia Parent Information Sheet

HOME BASED CARE FOR FEBRILE NEUTROPENIA

Parent Information Sheet

We are aiming to safely reduce the duration of hospital stay and the duration of antibiotics for your child.

Your child is being treated for **febrile neutropenia (FN)**. This means your child has a fever higher than 38°C and low neutrophils, which is a type of white blood cell important for fighting infections. Because of this your child is less able to fight infections.

Over recent years, teams from around the world have studied the safest approach to managing this problem in different health care settings. The results from these studies and the experience gained has now been shared to help with the effort to manage patients safely whilst minimising time spent in hospital. The approach taken, means that children experiencing an episode of fever with neutropenia are put into different 'risk' groups, depending on their risk of serious infection (during a particular episode)

With this in mind, the Haematology and Oncology team have assessed your child as having a low-risk fever and neutropenia episode. In common with other UK paediatric oncology centres, RHC now has a way to treat low-risk febrile neutropenia safely at home with support from the hospital. This means your child can complete their antibiotics at home. Your hospital's oncology team will work closely with you and your child to monitor your child's progress.

Eligibility for home treatment:

Before we can transfer your child home:

- you have agreed to live, or have accommodation, within 1 hours drive of {Insert hospital name (PTC or POSCU)} _____
- you must have immediate transport available (either car or ambulance) if you have to return to {Insert hospital name} _____
- you must have a working home phone or mobile phone
- you must agree to stick to the instructions of the Haematology / Oncology team.

When you are at home:

When your child goes home, a member of the hospital team will call you regularly until your child is well and has completed their antibiotics. You may be asked to stop giving the antibiotics even though you have some left.

While you are at home, you will need to take your child's temperature every 4 hours when they are awake until you are told by the hospital team you can stop.

Your child will be receiving antibiotics as a medicine by mouth or via their NG tube. Please follow the instructions for giving these that are given by your hospital.

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When to call the hospital:

We expect your child to carry on having temperatures for a while; it might take three or four days for it to settle completely. We will ask about it when we call you, but do not want you to worry just because your child gets hot.

You should contact the hospital team on {insert hospital contact details} (24 hours per day/7 days per week) at any time if you are worried about your child or if they have any of the following symptoms:

- Does not feel well or look right to you
- Chills or shaking
- Persistent vomiting or new diarrhoea
- Infection: redness, tenderness or pain anywhere on the body
- Tiredness, paleness or shortness of breath
- Dehydration – decreased urine, dry mouth
- **Your child has a low temperature (less than 36°C)**
- Pain: severe or persistent
- Refusing to drink/poor fluid intake

Remember, you know your child best. If you are concerned or worried, or if something doesn't feel quite right, speak to your child's treating team.

In an emergency, call 999

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