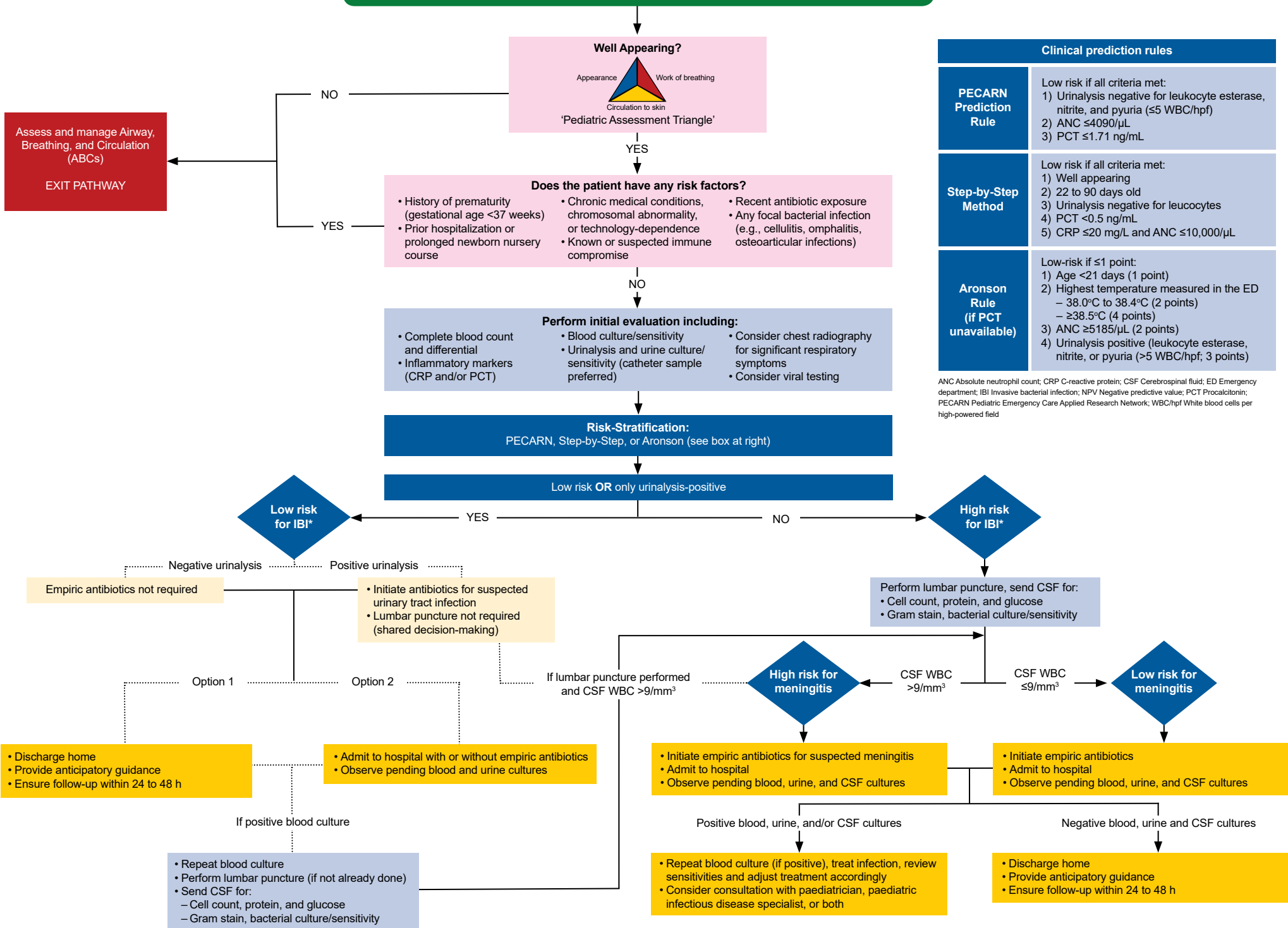


**Infant aged 29 to 60 days with a documented rectal temperature  $\geq 38^{\circ}\text{C}$**



Clinical prediction rules	
<b>PECARN Prediction Rule</b>	Low risk if all criteria met: 1) Urinalysis negative for leukocyte esterase, nitrite, and pyuria ( $\leq 5$ WBC/hpf) 2) ANC $\leq 4090/\mu\text{L}$ 3) PCT $\leq 1.71$ ng/mL
<b>Step-by-Step Method</b>	Low risk if all criteria met: 1) Well appearing 2) 22 to 90 days old 3) Urinalysis negative for leucocytes 4) PCT $< 0.5$ ng/mL 5) CRP $\leq 20$ mg/L and ANC $\leq 10,000/\mu\text{L}$
<b>Aronson Rule (if PCT unavailable)</b>	Low-risk if $\leq 1$ point: 1) Age $< 21$ days (1 point) 2) Highest temperature measured in the ED – $38.0^{\circ}\text{C}$ to $38.4^{\circ}\text{C}$ (2 points) – $\geq 38.5^{\circ}\text{C}$ (4 points) 3) ANC $\geq 5185/\mu\text{L}$ (2 points) 4) Urinalysis positive (leukocyte esterase, nitrite, or pyuria ( $> 5$ WBC/hpf; 3 points)

ANC Absolute neutrophil count; CRP C-reactive protein; CSF Cerebrospinal fluid; ED Emergency department; IBI Invasive bacterial infection; NPV Negative predictive value; PCT Procalcitonin; PECARN Pediatric Emergency Care Applied Research Network; WBC/hpf White blood cells per high-powered field

Figure 2. Management of infants aged 29 to 60 days with a documented rectal temperature  $\geq 38^{\circ}\text{C}$   
 © Canadian Paediatric Society. Source: Management of well-appearing febrile young infants aged  $\leq 90$  days, Acute Care Committee, October 12, 2023. Available at www.cps.ca