

Who can I contact if I am worried?

If you have any concerns before your follow up, please contact:

0151 478 753

Monday- Friday, 9am - 7pm

Outside these times, contact Clatterbridge Cancer Centre Hotline on 0800 169 5555

If you any questions or concerns about your treatment, contact the Acute Medical Unit Same Day Emergency Care Coordinator on 0151 478 7537.

If you consider it an emergency please dial 999 or attend the Emergency Department



Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633

 /sthknhs  @sthk.nhs
www.sthk.nhs.uk

Low Risk Febrile Neutropenia Same Day Emergency Care

This leaflet can be made available
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.

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Management Plan

This is your personal management plan with the aim of helping you stay better informed.

Name :

Treatment:

Date and time of first attendance:

Follow Up :

What is febrile neutropenia ?

Chemotherapy can cause your white blood cell count to fall. This is called neutropenia. When it happens, you are more likely to develop an infection and high temperature called febrile neutropenia. At times, it can be serious and you may need to be admitted to hospital. In many cases, the infection can be managed at home with tablet antibiotics after you have been seen by a doctor.

What will happen when I am in hospital?

You will be seen by a doctor who will take history and examine you. They will order initial tests such as blood and urine tests, ECG (heart tracing) and an X-Ray of the chest. You will also have a dose of intravenous (drip) antibiotics.

When the tests results are back, the doctor will decide if it is safe for you to go home, or if you need to be admitted to hospital.

How is febrile neutropenia treated?

When your white blood cells are low and you have a fever we will use antibiotics to treat suspected infection. If the risk of complications from the infection is low, you are likely to get better with tablet antibiotics. You must take the antibiotics we gave you. If you have problems taking tablets, you must contact us on one of the numbers at the bottom of this leaflet.

What are the next steps?

After seeing a doctor you will be observed for at least four hours. If you remain well, you will be discharged home with tablet antibiotics. We will arrange follow up for you on ward 1B two days after your discharge.

What should I watch out for?

There is a risk that your infection could develop into sepsis (blood poisoning), which can be life-threatening. We ask you to be vigilant and contact the **24-hour advice line immediately** if you experience any of the following:

- You feel worse
- You are not improving despite taking the antibiotic tablets as instructed
- You have **new or worsening symptoms** e.g. feeling generally unwell, not able to get out of bed. Flu like symptoms - feeling cold and shivery, headaches, aching muscles
- Change in temperature – 37.5°C or higher OR below 36°C
- Coughing up green phlegm
- A sore throat
- Diarrhoea - 4 or more loose, watery bowel movements in 24 hours
- Being sick/vomiting
- Pain or burning when passing urine
- Skin changes – redness, hotness, swelling or pain
- Redness, pain, hotness or swelling around your central line if you have one

What will happen at the follow up review?

At your follow up appointment we will want to make sure you are getting better. We will check you over and review your blood tests. We might order more tests to check if your blood count and infection markers are getting better. We will then decide if we need to make any changes to your plan.