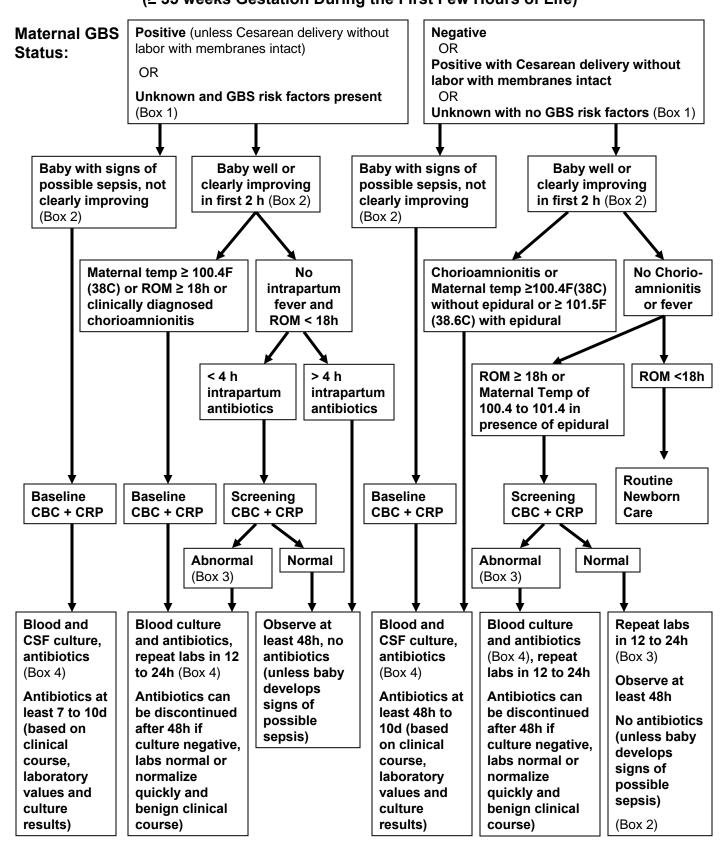
Evaluation and Management of Possible Neonatal Sepsis (≥ 35 weeks Gestation During the First Few Hours of Life)



Box 1. Group B Streptococcus Risk Factors

- 1. Delivering at <37 weeks' gestation
- 2. Intrapartum temperature >=100.4°F (>=38.0°C)
- 3. Rupture of membranes for >18 hours
- 4. Previous infant with invasive GBS disease
- 5. GBS bacteriuria during the current pregnancy

Box 2.

Signs of Possible Neonatal Sepsis: tachypnea, grunting, cyanosis, oxygen requirement, apnea, persistent temperature <36.5 or >37.5, hypotonia, poor feeding, persistent unexplained hypoglycemia

Baby well or clearly improving means clear and rapid improvement during the first 2 hours of life, no residual signs by 2 hours of age, and no worsening of any signs.

Box 3. Normal Lab Values

- 1. **CRP:** normal < 0.5 mg/dL (at UIHC, other hospitals may use different values)
- 2. **CBC: normal I:T ratio at birth < 0.16** (although some use a cutoff of 0.20)

I:T ratio = (immature forms) / (total neutrophils + immature forms).

Also total neutrophil count should be within normal limits according to age (see nomogram at http://www.uihealthcare.com/depts/med/pediatrics/iowaneonatologyhandbook/infection/referenc erange.html)

Box 4. Antibiotics

- 1. Ampicillin 100 mg/kg/dose IV q12h.
- 2. Gentamicin 4 mg/kg/dose IV q24h.

Get a trough gentamic level before the 2nd dose. If > 1.0, hold and check at 36 h. If < 1.0 at 36h, give q 36h. If still > 1.0 at 36h, hold and check at 48 h and give q 48h if < 1.0.

References

Benitz et al. Risk factors for early-onset Group B Streptococcal sepsis. Pediatrics 1999; 103:77e.

Escobar et al. Neonatal sepsis workups in infants >= 2000 grams at birth. Pediatrics 2000; 106:256.

Schrag et al. Prevention of perinatal Group B Streptococcal disease. MMWR 2002;51:1.