4: Evaluation and initial management of fever in a returned traveller

1. Suspected febrile illness in a returned traveller
2. Confirm fever
3. Severe sepsis (confusion, collapse, cyanosis, tachypnoea, hypotension, neck stiffness, peritonism or digital gangrene)
4. No features of severe sepsis
   - Resuscitation if shocked
   - Blood cultures
   - Malaria films
   - Penicillin or ceftriaxone
      (if meningococcal disease likely)
   - History: Travel and fever onset (compare with typical incubation periods)
   - Pattern of fever: Occasionally helpful (e.g., second-daily paroxysm in vivax malaria)
   - Focal features: Neck stiffness, cellulitis, abdominal tenderness, pulmonary consolidation
   - Investigations: Full blood count, liver function tests, blood cultures (two), chest x-ray, urine microscopy and culture, baseline serological tests, specific investigations for focal disease
   - Malaria possible
     - Thick and thin malaria films (if initially negative, repeat 3 times)
     - Plasmodium vivax, ovale or malariae
     - Urgent hospital transfer
   - Rash
     - Consider dengue or rickettsial disease
       - Serological tests
       - Consider empirical doxycycline for rickettsia
   - Respiratory symptoms
     - Return within 3 days from country with acute influenza
     - Pulmonary consolidation
   - Fever >7 days, malaria ruled out
     - Consider enteric fever
       - Blood, stool and urine cultures
       - Consider empirical quinolone or third-generation cephalosporin
   - Jaundice
     - Consider
       - Acute hepatitis (e.g., A, B, C, E, Epstein–Barr virus, dengue, Q fever): serological tests
       - Acute cholangitis (stones, liver fluke): blood cultures, ultrasound and stool examination
       - Liver abscess (amoebic, pyogenic): blood cultures, serological tests

PCR = polymerase chain reaction.
*Evaluation should also include the differential diagnoses that would be considered in a non-traveller with fever.
†Travel to high-risk area, rural or prolonged travel, non-compliance with prophylaxis.