A total of 142 children were included in the study (71 cases). The median age of cases and controls was 2.5 months (IQR: 1–72) and 2 months (IQR: 0.7–36) respectively (P = 0.157). A pathogen was detected in 38/73 (53.5%) children with the use of FA and in 16/71 (22.5%) in the control group (P < 0.001). In aseptic meningitis cases a virus was detected in 27/60 (45%) and in 11/64 (16.4%) controls (P < 0.001). Length of stay in cases with meningitis was 5 days (IQR: 4–8) and 8 (IQR: 6–10) respectively (P < 0.001). The median duration of antimicrobials in cases was 4 days (IQR: 2–5) and 7 (IQR: 5–10) respectively (P < 0.001). The hospitalization cost was calculated in cases and controls 1,042 (IQR: 932–1,372€) and 1,522 (IQR: 1,309–1,743€) respectively (P < 0.001).

Conclusion. The use of FA was able to reduce significantly the hospitalization days and the total cost comparing to the control group in children with suspected CNS infection.

Disclosures. All authors: No reported disclosures.