



# Are your patients on antimicrobials?

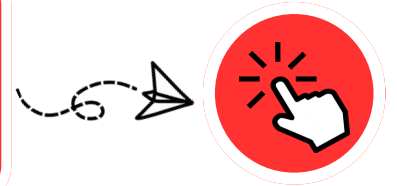
Think..... **SODA POP**  
for every person, every time!



**S**

## Source control

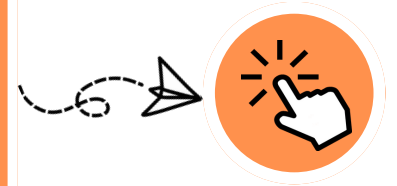
Less pus = less antibiotics!  
Timely source control is key for infection management. If your patient has an undrainable deep abscess - discuss with an infection specialist.



**O**

## Oral antimicrobials

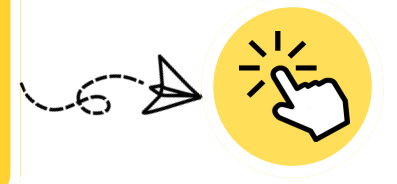
Oral is the new IV.... review IVs daily!  
Many antimicrobials have very good bioavailability and don't need to be given by IV route - have a look at our new infographic which includes our H.O.M.E criteria for IV to oral switch too!



**D**

## Duration

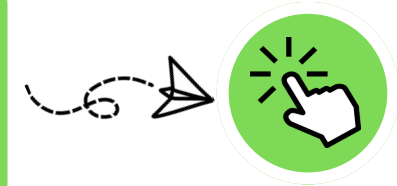
For orals remember to add stop dates to HEPMA!  
Maximum duration of gentamicin has been extended to 96 hours for select patients where appropriate - check out the updated guidance and new prescription chart!



**A**

## Alternatives

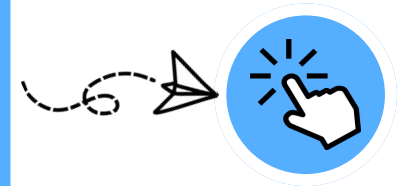
Unfortunately we have to manage drug shortages - if needed refer to our alternatives documents. There is one for aztreonam but make sure you have considered the 4 key actions first!



**P**

## Penicillin allergy delabelling (PADL)

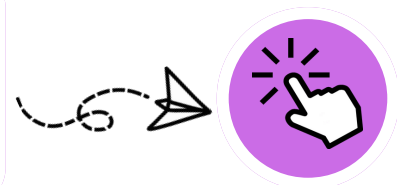
90% of patients are incorrectly labelled with a penicillin allergy - have a look at the algorithm - can you delabel your patient? Make sure to follow the SOP on NHST antimicrobial website!



**O**

## Optimising diagnostics

Appropriate and timely tests - in appropriate patients - help with appropriate prescribing!  
Diagnosing a UTI - don't be a dipstick!



**P**

## Policies

Treating an infection? We have lots of guidance for each body system on the NHST antimicrobial website on StaffNet and on our APP.  
Do you know the '5 Rights' of antimicrobial stewardship? Have a look at our infographics on the top banner of our website!

