

UPDATE TO SEPSIS SECTION OF ANTIBIOTIC WEBSITE

SEPSIS			
Clinical conditions	Pathogen(s)	Antibiotic(s)	Comments
Sepsis in non-neutropenic patient	<i>E.coli</i> <i>Strep. pneumoniae</i> <i>Staph. aureus</i> Others	Refer to Hospital Antibiotic Man if source known or suspected otherwise start: IV Amoxicillin + Metronidazole + Gentamicin	Complete Sepsis 6 bundle and start antimicrobial therapy within 1 hour If penicillin allergic: IV Vancomycin + Metronidazole + Gentamicin
Sepsis in neutropenic patient	Coliforms Pseudomonas Staphylococci Viridans streptococci	Haematology Patient Oncology Patient Non Haem/Onc Patient (please add link to new document)	
Sepsis in patients with intravascular catheter in situ	<i>Staph. epidermidis</i> <i>Staph. aureus</i>	Flucloxacillin 2g IV qds	Consider removing the catheter. Consider also changing to IV vancomycin if no improvement or if MRSA/MRSE is isolated in blood culture or patient is known to be MRSA positive or previous line infection with MRSA/MRSE. If confirmed <i>S. aureus</i> bacteraemia (SAB) refer to national guidance Antifungal therapy – click here

Approved by AMG: August 2014

Review: August 2016