



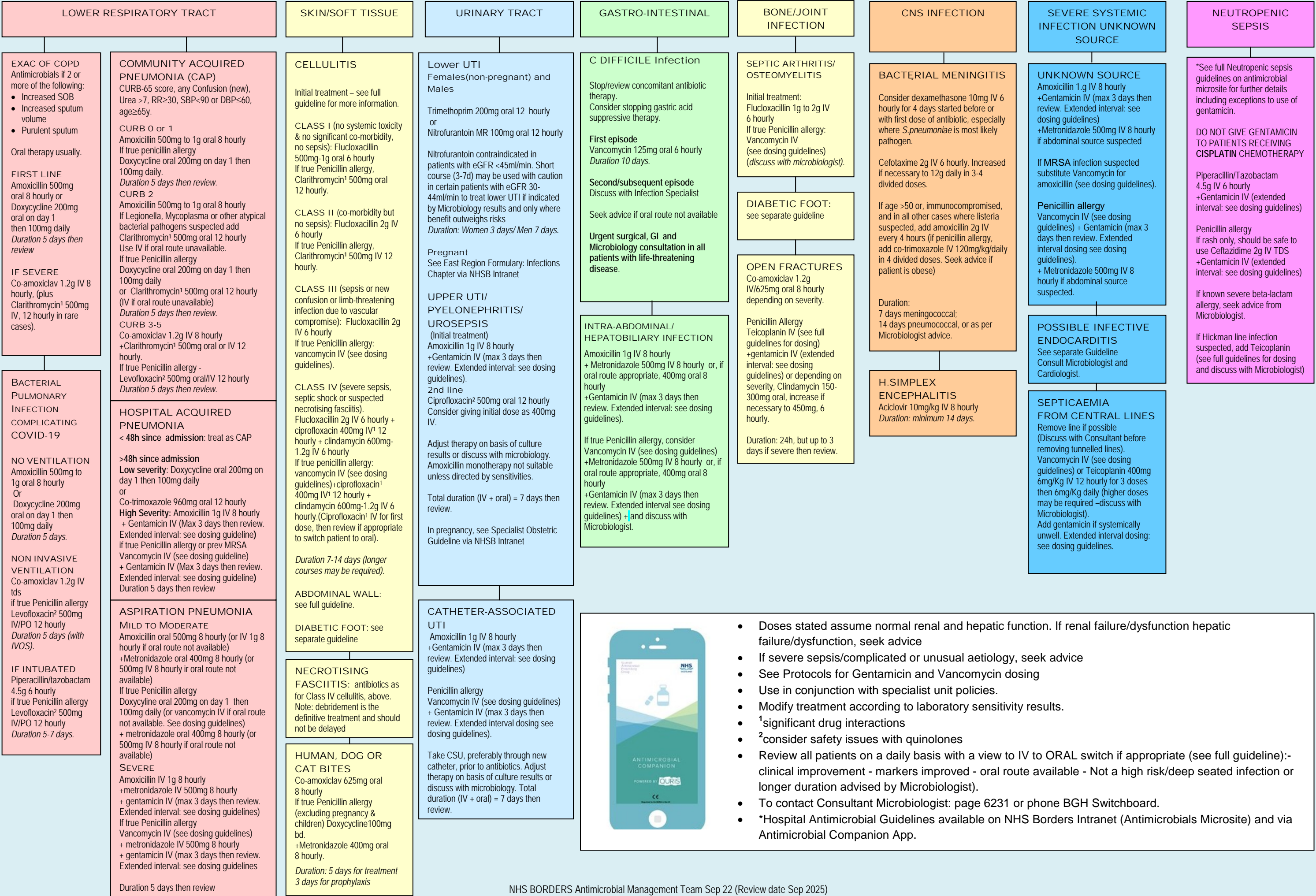
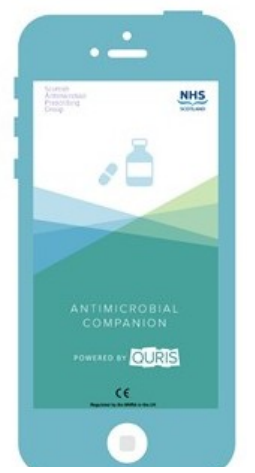
Title	Empirical Antibiotic Therapy for Adults Summary
Document Type	Guideline
Version number	V4
Approval/Issue date	Sept 22 (updated as below)
Review date	Sept 25
Approved by	NHS Borders Antimicrobial Management Team
Owner/Person Responsible	Anne Duguid, Antimicrobial Pharmacist
Developed by	NHS Borders Antimicrobial Management Team
Reviewed by	NHS Borders Antimicrobial Management Team
Healthcare Inequality Impact Assessed (statutory for policies)	N/A

Addition/amendments	Approved date
Change to recommendations for CAP	Sep 22
Change to recommendations for HAP	Sep 22
Change to recommendations for UTI in line with ERF guidance	Sep 22
C.difficile infection – change to recommendations in line with NICE and SAPG guidance	Sep 22
IAI/Hepatobiliary – addition of oral route option for metronidazole	Sep 22
Meningitis – change in dexamethasone dose as for BNF, addition of penicillin allergy recommendation in suspected Listeria infection	Sep 22

Uncontrolled when printed

EMPIRICAL ANTIBIOTIC THERAPY FOR ADULTS: SUMMARY

See Full Guidelines for further information*

- Doses stated assume normal renal and hepatic function. If renal failure/dysfunction hepatic failure/dysfunction, seek advice
- If severe sepsis/complicated or unusual aetiology, seek advice
- See Protocols for Gentamicin and Vancomycin dosing
- Use in conjunction with specialist unit policies.
- Modify treatment according to laboratory sensitivity results.
- ¹significant drug interactions
- ²consider safety issues with quinolones
- Review all patients on a daily basis with a view to IV to ORAL switch if appropriate (see full guideline):- clinical improvement - markers improved - oral route available - Not a high risk/deep seated infection or longer duration advised by Microbiologist).
- To contact Consultant Microbiologist: page 6231 or phone BGH Switchboard.
- *Hospital Antimicrobial Guidelines available on NHS Borders Intranet (Antimicrobials Microsite) and via Antimicrobial Companion App.