

Waterford: Antimicrobial Guidelines - Antimicrobial Guideline: Yeasts on Gram Stain

Yeasts on Gram Stain

Yeasts on blood culture Gram stain should be always be considered as **significant and suggestive of candidaemia** (Candida blood stream infection) pending full clinical review and subsequent species identification. Assess the patient for signs and symptoms of candidaemia, carry out a NEWS score and review previous microbiology results for history of candida colonisation.

Review with regards to potential source(s) including intravenous catheters and intra-abdominal infections.

Repeat blood cultures, consider removal of central lines if implicated and organise echocardiogram.

Other life threatening fungaemia such as cryptococcaemia in immunocompromised hosts e.g. HIV should be considered, It is important to note that *Cryptococcus* appears as a yeast on Gram stain also and clinical correlation is paramount in these settings.

Empiric antifungal cover

Start an echinocandin such as **Anidulafungin 200mg stat IV** on Day 1 followed by 100mg OD IV on Day 2 and thereafter pending subsequent identification of the presumed *Candida* species and antifungal sensitivity testing. Where there is suspicion of cryptococcaemia or other fungaemia, please discuss with clinical microbiology for alternative empiric antifungal therapy.

Liaise with clinical microbiology team regarding follow up and assessment for potential de-escalation as part of the clinical review the following day, and for advice on ongoing management such as source control and optimisation of antifungal therapy based on antifungal sensitivity testing and clinical response.