

Louth: Antimicrobial Guidelines - Louth Hospitals: Antimicrobial Guidelines: Obstetrics - Respiratory

Indication
Obstetrics - Influenza (Flu)
First Line Antimicrobials OR Penicillin Hypersensitivity
Osetamivir 75mg BD
Comments
<ul style="list-style-type: none"> Pregnant women are at increased risk of severe and complicated influenza, including associated hospitalisation and death, compared to non-pregnant women of reproductive age Monitor women carefully for signs of bacterial super-infection (e.g. Group A Streptococcus) Please see https://www.hpsc.ie/a-z/respiratory/influenza/seasonalinfluenza/guidance/ for further information and national guidance on the management of influenza in pregnant patients For close contacts of confirmed influenza, an individual risk assessment should be made on whether to give oseltamivir prophylaxis.
Duration
5 days
Indication
Obstetrics - Lower Respiratory Tract Infections – Outpatient Treatment
First Line Antimicrobials
Amoxicillin 500mg TDS PO
Penicillin Hypersensitivity
Azithromycin 500mg on day 1, followed by 250mg daily for 4 days.
Take azithromycin at least one hour before or two hours after food.
Duration
5 days
Indication
Obstetrics - Lower Respiratory Tract Infections – Inpatient Treatment
First Line Antimicrobials
Cef-UR-oxime 1.5g QDS IV
AND
Azithromycin 500mg on day 1, followed by 250mg daily for 4 days.
Take azithromycin at least one hour before or two hours after food.
NON-immediate-onset and NON-severe Penicillin Hypersensitivity
Cef-UR-oxime 1.5g QDS IV
AND
Azithromycin 500mg on day 1, followed by 250mg daily for 4 days.
Take azithromycin at least one hour before or two hours after food.
IMMEDIATE-onset or SEVERE Penicillin Hypersensitivity
N.B. Ask patient about the nature of their penicillin hypersensitivity.
Contact clinical microbiologist for advice.
Comments
<ul style="list-style-type: none"> Consider adding oseltamivir during the influenza season if the patient has clinical signs or symptoms suggestive of influenza Microbiological Investigations: <ul style="list-style-type: none"> Blood cultures if pyrexial Sputum for C&S Pneumococcal and legionella urinary antigens If viral aetiology suspected, send nose and throat viral swabs (in red-top tube containing viral transport medium) for influenza and SARS-CoV-2 PCR. Rule out TB if suspected
Duration
7 days (5 days for azithromycin)