

Galway: GAPP - Galway Antimicrobial Prescribing Policy / Guidelines (GAPP): Suspected Meningococcaemia (without features of meningitis)

Suspected Meningococcaemia (without features of meningitis)

1. Discussion with Microbiology or Infectious Diseases recommended.
2. When infection with susceptible *N. meningitidis* is confirmed, therapy with **Benzylpenicillin** alone is appropriate.
3. **Chloramphenicol** is available in the Emergency Department and in the Pharmacy Department. **Meropenem** may be an alternative to chloramphenicol in patients with a history of penicillin anaphylaxis, as recommended in Irish guidelines, with close monitoring for cross-sensitivity e.g. in ICU.
4. See [Appendix 3](#) for management of contacts.

Infection	1 st Line Antibiotics	Penicillin allergy:	Penicillin allergy:	Comment
		delayed onset non-severe reaction	immediate or severe delayed reaction	
		See penicillin hypersensitivity section for further information		
Suspected Meningococcaemia (without features of meningitis)	Ceftriaxone IV 2g every 12 hours	Ceftriaxone IV 2g every 12 hours	Give first dose Chloramphenicol IV 25mg/kg and IMMEDIATELY contact Microbiology or Infectious Diseases to discuss options. Discuss need for nasopharyngeal eradication for the patient with Microbiology or Infectious Diseases	Duration 7 days