Late Onset Sepsis in Neonates (ACH Park Ridge & Oak Lawn Only)

Advocate Children's Hospital

Suspected Late Onset Sepsis (after 72h of age)

- Obtain CBC, CRP, and Peripheral Blood Culture. Consider obtaining Procalcitonin
- Obtain urine culture and urine analysis (Consider CSF culture)
- **Start Gentamicin and Oxacillin empirically**
- Consider past culture results, antibiotic exposure and suspected focus of infection
- **Consider Vancomycin and Ceftazidime** if infant has hemodynamic instability needing vasopressors or CBC shows leukopenia

Blood Culture no growth at 36 hours

Clinically stable

Discontinue Antibiotics

Clinically unstable

- Repeat Blood Culture
- Consider CSF Culture (if not done earlier)
- ID consult

Blood Culture positive with Gram positive Organism

- Repeat Blood Culture (Peripheral and from Central lines if present)
- **Add Vancomycin until organism is identified**
- **Discontinue Gentamicin**
- Consult ID if infant is already on Vancomycin and Ceftazidime

Organism identified as CoNS in initial culture

Repeat Blood Culture no growth at 36 hours

Consider Discontinuing Antibiotics

Organism identified is not CoNS in initial culture

ID Consult

Blood Culture positive with Gram negative Organism

- Repeat Culture
- Obtain CSF culture (if not done earlier)
- ID Consult
- **Discontinue Oxacillin/Vancomycin**
- **Treat with Ceftazidime and Gentamicin until organism is identified**

Narrow treatment to appropriate agent based on susceptibilities

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