

Louth: Antimicrobial Guidelines - Louth Hospitals: Antimicrobial Guidelines: Prescribing Principles

- See RCPI “ [Start Smart then Focus](#) ” Antibiotic Care bundle for a summary of prescribing principles.
- If the patient is **pregnant or breast-feeding** , the prescriber should check the stage of pregnancy and the safety of each antimicrobial for use in pregnant or breast-feeding patients.
- **N.B** . Always review empiric therapy after 48 hours in conjunction with culture and sensitivity (C&S) results.
- The ideal antibiotic is effective, safe and cost-effective, does not induce resistance or cause healthcare-associated infection.
- The development of *Clostridium difficile* infection is of particular concern and is associated with the inappropriate use of antimicrobial agents.
- [Penicillin and related hypersensitivity](#) must always be considered when prescribing antibiotics.
- High dose therapy for a shorter period is more effective than low dose therapy for a protracted course.
- Antibiotic review date / planned duration should be documented on the drug chart and in the medical notes.
- Antibiotics are useful for treating bacterial infection. However in situations where source control (i.e. drainage of an abscess or relief of an obstruction) is required, antibiotics are only useful as an adjunct to these measures.
- Intramuscular administration should be avoided except in specific circumstances, eg. sexually transmitted infections, transrectal prostate biopsy antibiotic prophylaxis.
- The use of topical antimicrobial agents should be discouraged as this encourages development of resistance.
- All serious adverse drug reactions (ADR) should be reported to the Health Products Regulatory Authority (HPRA), previously known as the Irish Medicines Board. The ADR should be reported electronically on www.hpra.ie . The reported ADR and any resulting correspondence should also be recorded in the patient's medical notes.
- See relevant section on antibiotics that are subject to [restricted use](#) .
- This guideline should be made available to locum and agency prescribing staff as well as permanent staff.
- Any deviation in the use of antimicrobials from this guideline should be clearly documented in the patient's medical record.
- If the Consultant Microbiologist or ID Consultant is contacted concerning patient management, this should be by a senior medical staff member when possible, i.e. Registrar or Consultant.