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| **INFECTIOUS DISEASES / MICROBIOLOGY REVIEW** | |
| **Consult reason** | Positive blood cultures |
| **\*Diagnosis\*\*** | E coli bacteraemia, presumed urinary source |
| **Background** | Diabetes Hypertension BPH -- long term catheter |
| **Presentation & Clinical Progress** | Admitted 26/2 with lower abdo pain and fever |
| **Antibiotic history** | 26/2 → co-amox iv |
| **Vital signs rules** | New fever in the last 24 hours, 40.1掳C.  Unstable concerning HR, 137 bpm.  SBP low, 99 mmHG. |
| **Vital signs ds** | "New fever in the last 24 hours, 37.8°C.  Unstable concerning HR, 137 bpm. SBP low, 99 mmHg." |
| **Physical exam** | Abdo soft and non tender |
| **Micro results** | 10/12 – BLOOD CULTURE  08/12 – PUS MICRO / CULTURE  08/12 – TB CULTURE  06/12 – BLOOD CULTURE  12/11 - MRSA SCREEN - Negative  12/11 - CPE SCREEN - Negative  12/08 - ANAEROBIC CULTURE - Negative  12/08 - FUNGUS CULTURE - Negative  12/08 - NOCARDIA CULTURE - Negative  12/08 - PCR FOR MTB COMPLEX  12/08 - PUS MICRO / CULTURE - Negative  12/08 - TB CULTURE - Negative  12/07 - SYPHILIS/TREPONEMA AB - Negative  12/07 - CMV VIRAL LOAD |
| **Blood results** | 28/2 WCC 14 (falling, from 20 on 26/2); CRP 150 (from 300 on 26/2) |
| **Imaging** |  |
| **Discussion** | With team F1, David |
| **\*\*Advice\*\*** | Continue current antibiotics Consider changing catheter while on antibiotics If remains febrile consider ultrasound of urinary tract We will review with final microbiology results |
| **Signed** | David Eyre, Consultant in Infection |
| **Responsible consultant** | David Eyre |