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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** | Afebrile, last spike 4 days ago.  HR, 90 bpm.  SBP slightly low, 110 mmHG. |
| **Vital signs ds** | "Afebrile, last fever 4 days ago.  HR raised, 90 bpm. SBP slightly low, 110 mmHg." |
| **Physical exam** | Abdo soft and non tender |
| **Micro results** | 23/09 – TB CULTURE – TISSUE;LungLowrLob R MYCOBACTERIAL CULTURE: NO GROWTH AFTER 8 WEEKS  23/09 – REF FUNGAL PCR – \*\*No clear Result\*\* +  Summary: No findings reported.  23/09 – FUNGUS CULTURE – \*\*Negative\*\*  Summary: Fungal culture negative.  23/09 – ANAEROBIC CULTURE – \*\*Negative\*\*  Summary: No anaerobes isolated.  23/09 – NOCARDIA CULTURE – \*\*Negative\*\*  Summary: No Nocardia growth.  23/09 – RESP. CULT AND MICRO – TISSUE;LungLowrLob R NO GROWTH AFTER 6 DAYS  23/09 – GRAM SMEAR – \*\*Negative\*\*  Summary: No organisms seen.  23/09 – TB MICROSCOPY – \*\*Negative\*\*  Summary: No mycobacteria seen.  22/09 – BLC – ;Femoral R NO GROWTH AFTER 5 DAYS  22/09 – BLC – ;Other (specify site in Clinical Details) NO GROWTH AFTER 5 DAYS  20/09 – BLC – PERIPHERAL–RIGHT NO GROWTH AFTER 5 DAYS  20/09 – BLC – ;Other (specify site in Clinical Details) NO GROWTH AFTER 5 DAYS  --------Previous result (1 year)--------  24/07 – EBV VCA IgG – Positive  19/06 – RESPIRATORY PCR – \*\*Positive\*\*  \*\*Summary:\*\* Human Rhinovirus/Enterovirus detected.  12/06 – EBV VCA IgG – Positive  20/02 – RESPIRATORY PCR – \*\*Positive\*\*  \*\*Summary:\*\* RSV detected by PCR.  04/02 – RESPIRATORY PCR – \*\*Positive\*\*  \*\*Summary:\*\* RSV detected in throat swab. |
| **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 |