Antibiotic Guidelines For The Management Of Infection Infections

Medical Management of the Surgical Patient
Antibiotic-resistant Strains of Neisseria Gonorrhoeae
Cumulated Index Medicus
Meningitis and Encephalitis
Nosocomial and Ventilator-Associated Pneumonia Infections in Surgery
Bennett & Brachman's Hospital Infections
Antimicrobial Stewardship
Sepsis Management
Pulmonary Infections, An Issue of Sleep Medicine Clinics - E-Book
Standard Treatment Guidelines, Essential Medicines List & Essential Laboratory Supplies List for Zambia
Pocket Book of Hospital Care for Children
Policy Guidelines for the Detection, Management, and Control of Antibiotic-resistant Strains of Neisseria Gonorrhoeae
Clinical Management of Bacterial Pneumonia
Future Research Needs on Procalcitonin-Guided Antibiotic Therapy
Antibiotic and Chemotherapy E-Book
Endocarditis
Nosocomial Pneumonia
Contemporary Antibiotic Management for Urologic Procedures and Infections, An Issue of Urologic Clinics
Diagnosis and Management of Pneumonia and Other Respiratory Infections
Abdominal Sepsis
Community-Acquired Pneumonia
Community-Acquired Respiratory Infections
Evidence-Based Infectious Diseases
Respiratory Disease and its Management
Outpatient Community-acquired Pneumonia in Adults Guidelines Pocketcard
LOW ADHERENCE TO THE CURRENT GUIDELINES FOR MANAGEMENT OF FEBRILE INFANTS IN A SWEDISH PEDIATRIC EMERGENCY DEPARTMENT
Antibiotic Optimization
Diagnosis and Treatment in Internal Medicine
Sepsis
MYCDDC GP - Guidelines for Clinical and Public Health Management of Melioidosis In Pahang
Clinical Practice Guidelines as a Management Tool for Antibiotic Resistance in Streptococcus Pneumoniae
Primary Care Medicine
Antibiotic Policies: Fighting Resistance
Antibiotic Guidelines 2015-2016
Guidelines for the
Management of Patients with Antibiotic-resistant Organisms
Handbook of Sepsis
Management in Resource-limited Settings
Acute Medicine
Management of Severe Traumatic Brain Injury
This multi-contributed text, co-ordinated by one of the leading authorities in the field, is a unique resource to cover in depth the management of the important issue of Nosocomial Pneumonia in respiratory medicine and critical care. This disease presents the clinician with a variety of challenges, in both diagnosis and management, all of which represent a significant concern for the welfare of patients whose ability to combat infection is frequently already compromised. Nosocomial Pneumonia: Strategies for Management is dedicated specifically to this most common hospital acquired respiratory infection and reviews important new advances in therapeutics, including drug resistance. It is an essential resource for all postgraduates and specialist physicians in pulmonology and infectious diseases. This new addition will provide an update on the current prophylaxis guidelines, the new diagnostic approach in the detection of the disease, the proposed schemas to predict prognosis, and the new treatment strategies to improve the outcome of patients afflicted with this serious condition. Endocarditis is a serious disease with a high rate of morbidity and mortality. The in-hospital mortality remains at 10-20%. The poor outcome of patients with this condition is due in large part to the delay in making the diagnosis which frequently can be elusive. As a result of its wide spectrum of manifestations, endocarditis can mimic many different conditions ranging from stroke to renal failure. In order to minimize the delay in diagnosis, clinicians need to always be mindful of the possibility that endocarditis may be the cause of the symptoms. There have been ongoing efforts in the development of molecular probes and new imaging techniques to improve our ability to identify the disease early and reliably. New treatment strategies have been studied with the aim to prevent complications and to improve survival. The structure of the previous edition is preserved. The book is divided into three sections with the first section covering the historical perspective and basic principles, the second section dealing with the diagnosis
and management approaches and the last section on specific clinical situations that pose management dilemmas. All the chapters will be updated to include new information from the recent studies. In particular, the approach to the use of antibiotic prophylaxis will be extensively revised to present and discuss the implications of the current guidelines from different national societies including the American Heart Association and the British Society for Antimicrobial Chemotherapy. This update is timely and should be of interest to all clinicians involved in the care of patients with this serious disease. This new edition will be a good resource for internists, infectious disease specialists, cardiologists and cardiac surgeons alike. The most influential reference in the field for nearly thirty years, Bennett and Brachman’s Hospital Infections is in its thoroughly updated Fifth Edition. Written by internationally recognized experts—many affiliated with the Centers for Disease Control and Prevention—the book is the most comprehensive, up-to-date, authoritative guide to the recognition, management, prevention, and control of infections in all types of healthcare facilities. More than half of this edition’s chapters have new authors who are current experts in the field. Important new chapters cover patient safety, public reporting, controlling antimicrobial-resistant pathogens (especially MRSA and VRE), fungi, and healthcare-associated infections caused by newer treatments such as invasive cardiology. This edition has a new two-color design. Medical training for Intensive Care Medicine (ICM) has made great developments over the years. Recent advances have led to the introduction of competency based training, with a strong focus on the development of specific competencies at basic, intermediate and advanced stages of learning. This ensures trainees hold the appropriate skills and knowledge to undertake safe clinical practice, and thus provide good patient care. One of the key topics covered in ICM training is respiratory disease and its management. Based on this, it would therefore seem appropriate to introduce a text that addresses each of the key areas. This book is unique in approaching multiple organ dysfunction syndrome (MODS) from the perspective of its pathophysiological mechanism, and addressing
aspects that are overlooked in most of the available literature. Eminent experts in the field from Europe and beyond offer new insights into risk stratification, severity assessment, and management of critically ill patients with sepsis. The principal focus is on recently developed concepts in infection management and in antibiotic use, bearing in mind that in these patients the pharmacokinetics of antibiotics are altered, affecting renal clearance and requiring dosage adjustments. The significance of the PIRO (predisposing factors, infection, response, organ dysfunction) model in the development of effective treatment strategies is emphasized. This book will be of interest and value to all who are involved in the treatment of, or research into, sepsis and MODS. Meningitis and Encephalitis are associated with high rates of mortality and neurological sequelae. The differential diagnosis includes a wide spectrum of infectious and non-infectious etiologies, some requiring urgent therapy for survival. The current management challenges in patients with meningitis and encephalitis include a low sensitivity of meningeal signs, overutilization of unnecessary screening cranial imaging, delays in diagnosis of urgent treatable causes, a large proportion of unknown etiologies, low sensitivity of current microbiological techniques especially in the setting of previous antibiotic therapy, underutilization of available molecular diagnostic tests, and empiric antibiotic therapy and hospitalization for viral meningitis cases. Even though there are published guidelines, compliance with them is not optimal and physicians do not follow standardized algorithms in their empirical approach. As meningitis and encephalitis is associated with high rates of adverse clinical outcomes, prevention, when feasible is of utmost importance. Adherence to protocols to prevent health-care associated meningitis and ventriculitis are effective but compliance with them is not uniformly performed. This book seeks to improve outcomes for meningitis and encephalitis cases handled by physicians who may or may not be thoroughly trained for these challenges. The text introduces the current guidelines but also discusses the gaps that leave clinicians struggling to implement the most appropriate approaches for these particular neurological infections. Each chapter delivers the tools
necessary to identify and adhere to the most appropriate diagnostic technique, management protocols, and prevention approach for each situation. All chapters conclude with discourse on future directions in research and quality improvement. Written by experts in infectious diseases, the book covers topics that are the most devastating, including healthcare-acquired infections, autoimmune encephalitis, and infections as they present in HIV patients. Meningitis and Encephalitis is a well-rounded resource for all medical professionals encountering these neurological syndromes, including infectious disease specialists, neurologists, primary care physicians, and immunologists. "The Johns Hopkins Antibiotic Guidelines were developed in 2002 and have been revised and expanded annually. These guidelines are evidenced-based, standardized recommendations tailored to match local susceptibility patterns. Content is developed by our team with input from Hopkins’ faculty content experts from all areas. The guidelines contain information on antimicrobial agents (e.g., indications for use, dosing and monitoring, institution-specific restrictions), microbiology information (e.g., pathogens, rapid diagnostics, antibiograms); and syndrome-specific recommendations (e.g., causative pathogens, recommended therapeutic agents, duration of treatment and management information)."

Community-Acquired Pneumonia (CAP) refers to pneumonia acquired outside of hospitals or extended-care facilities, and is distinct from Nosocomial or hospital-acquired pneumonia, which is a separate disease entity. It is one of the most common respiratory infections and presents one of the major health problems today, with an incidence that ranges from eight to fifty cases per thousand individuals each year. Mortality is still very high and yet the risk factors are very well known. Many of these are related to antibiotic treatment; delay in administration, inadequacy of empiric antibiotics and lack of adherence to guidelines for treatment are all clearly associated with poor treatment outcomes. Following a description of the epidemiology and microbial etiology of ambulatory and hospitalized CAP, this book provides an in-depth review of the important new advances in therapeutics,
including management of drug resistance to the three major classes of antibiotics used for treatment of CAP: β-lactams, macrolides and quinolones. All of them have advantages and disadvantages and these are put into perspective. This book highlights guideline recommendations and presents a balanced analysis to help physicians deliver the highest standard of care. In addition, the authors provide an insight into the 10% of patients who do not respond to antibiotics and could benefit from adjunctive therapies, some still under review. This volume will be welcomed by pulmonologists and all clinicians involved in managing community-acquired pneumonia. This pocket book contains up-to-date clinical guidelines, based on available published evidence by subject experts, for both inpatient and outpatient care in small hospitals where basic laboratory facilities and essential drugs and inexpensive medicines are available. It is for use by doctors, senior nurses and other senior health workers who are responsible for the care of young children at the first referral level in developing countries. In some settings, these guidelines can be used in the larger health centres where a small number of sick children can be admitted for inpatient care. Written by an international team of authors specializing in microbiology and infectious disease, this new edition of Evidenced-based Infectious Diseases presents practical, up-to-date information on the care of individual patients suffering from infectious diseases. Each chapter addresses a series of focused clinical questions addressed in a systematic fashion, including a comprehensive literature search, and a rating of the quality of evidence using principles of the GRADE framework. Evidence-Based Infectious Diseases is the ideal reference work for all those involved with microbiology, infectious diseases, and clinical management. Sepsis is an important public health problem around the world. Severe sepsis carries significant morbidity, mortality and high costs. The incidence of sepsis is increasing because of the aging population, the growing number of immunocompromised hosts, the increasing use of invasive procedures, and, to a lesser extent, antibiotic resistance among pathogens. Despite recent advances in the pathogenesis, diagnosis, and therapeutic approaches the mortality rate associated with
this condition remains high. Therefore, the goal of Sepsis: New Strategies is to review novel targets to be considered in patients with severe sepsis and to assess new developments for patients with sepsis originating in the respiratory tract. Sepsis is a serious condition with high morbidity and mortality for which clinical diagnostic criteria lack sensitivity and specificity. Early initiation of appropriate antibiotics and goal directed therapies reduce mortality. Conversely, overuse and misuse of antibiotics, including continuing antibiotics longer than necessary for cure can result in adverse events and add to the increasing problem of antibiotic resistance. Several serum biomarkers have been identified in recent years that have the potential to help diagnose local and systemic infections, differentiate bacterial and fungal infections from viral syndromes or noninfectious conditions, prognosticate, and ultimately guide management, particularly antibiotic therapy. Among these, procalcitonin is the most extensively studied biomarker. Numerous studies have investigated the potential roles of procalcitonin in diagnosing and managing local and systemic infections. However, its clinical utility in the diagnosis and management of patients with suspected infections remains unclear. A Comparative Effectiveness Review (CER) was prepared by the Blue Cross and Blue Shield Association Technology Evaluation Center Evidence-based Practice Center (BCBSA TEC EPC) on Procalcitonin-Guided Antibiotic Therapy. The objective of the CER was to synthesize comparative studies examining the various uses of procalcitonin in the clinical management of patients with suspected local or systemic infection. The patient populations included those with suspected sepsis or other serious bacterial infections in critically ill adults, neonates with suspected early neonatal sepsis, patients with upper and lower respiratory tract infections, children with fever of unknown source, and postoperative patients with infection. The following Key Question formed the basis for the CER: In selected populations of patients with suspected local or systemic infection, what are the effects of using procalcitonin measurement plus clinical criteria for infection to guide initiation, discontinuation, or a change of antibiotic therapy, when compared with clinical
criteria for infection alone on: Intermediate outcomes, such as initiation, discontinuation or change of antibiotic therapy, antibiotic usage, and length of stay? Health outcomes, such as morbidity, mortality, function, quality of life, and adverse events of antibiotic therapy (persistent or recurrent infection, and antibiotic resistance)? Five evidence gaps related to specific populations or comparators were identified in the CER. The evidence gaps are as follows: 1. What are the outcomes of procalcitonin guidance in subgroups of patients who are immunocompromised? 2. What are the outcomes of procalcitonin guidance in pediatric patients? 3. What are the outcomes of procalcitonin guidance in identifying patients at risk of infection who might benefit from pre-emptive antibiotic therapy? 4. Does the use of procalcitonin guidance reduce antibiotic resistance and antibiotic adverse events? 5. How does procalcitonin-guided antibiotic therapy compare to other approaches to reducing unnecessary antibiotic use, such as antibiotic stewardship programs and implementation of practice guidelines? This practically oriented book provides an up-to-date overview of all significant aspects of the pathogenesis of sepsis and its management, including within the intensive care unit. Readers will find information on the involvement of the coagulation and endocrine systems during sepsis and on the use of biomarkers to diagnose sepsis and allow early intervention. International clinical practice guidelines for the management of sepsis are presented, and individual chapters focus on aspects such as fluid resuscitation, vasopressor therapy, response to multiorgan failure, antimicrobial therapy, and adjunctive immunotherapy. The closing section looks forward to the coming decade, discussing novel trial designs, sepsis in low- and middle-income countries, and emerging management approaches. The book is international in scope, with contributions from leading experts worldwide. It will be of value to residents and professionals/practitioners in the fields of infectious diseases and internal medicine, as well as to GPs and medical students. This book examines in detail the topic of sepsis, with a focus on intra-abdominal sepsis. Particular attention is devoted to source control in the
management of the infection, antimicrobial therapy and sepsis support, which represent the cornerstones of treating patients with this problem. The importance of a multidisciplinary approach is highlighted not only by the instructive and informative sections on the acute manifestations of appendicitis, cholecystitis, and cholangitis, perforations and diverticulitis, Clostridium difficile infection and the role of candida in abdominal sepsis, but also by an extensive discussion of issues including antimicrobial resistance, damage control surgery, principles of antimicrobial therapy, hemodynamic support, adjunctive therapies, and thromboprophylaxis. Abdominal sepsis is the host’s systemic inflammatory response to intra-abdominal infections. It is associated with significant morbidity and mortality rates, and represents the second most common cause of sepsis-related mortality at intensive care units. Gathering contributions by authoritative experts from all around the world, this book will allow acute care surgeons, abdominal surgeons, intensive care clinicians, and students to broaden their understanding of intra-abdominal sepsis in daily clinical practice.

Now in its Sixth Edition, this comprehensive text provides pertinent information on medical diagnosis, therapy, lab tests, and health maintenance essential to decision making in primary care medicine. Every chapter has been revised to include more images, tables, and bulleted lists. Practical recommendations that incorporate the best available evidence, expert consensus guidelines, and clinical judgement are listed in bulleted items at the end of every chapter. The dermatology section has been extensively revised for this edition by a new section editor. A companion Website offers the fully searchable text and an image bank.

Now in its fifth edition, Medical Management of the Surgical Patient: A Textbook of Perioperative Medicine has been fully revised and updated, and continues to provide an authoritative account of the important aspects of perioperative care for surgical patients. Including recommendations for the best appropriate treatment of patients, it provides an evidence-based approach for consulting physicians to care for patients with underlying medical conditions that will affect their surgical management. New information
in the medical section includes chapters on performing the medical consult, asthma, and transplantation. The latest minimally invasive surgical techniques are included, with new chapters on thoracic aortic disease, reconstruction after cancer ablation, lung transplantation, esophagomyotomy, vasectomy, and thyroid malignancies, amongst others. With detailed descriptions of nearly 100 operations, highlighting their usual course, as well as their common complications, the book encourages learning from experience. This definitive account includes numerous contributions from leading experts at national centers of excellence. It will continue to serve as a significant reference work for internists, hospitalists, anesthesiologists, and surgeons. This book focuses on topics ranging from the economics of drug-resistant infections and the management of antimicrobial use to new information on methods to optimize the selection, route of administration, dosing, and duration of antimicrobial therapies for common infections. In addition to offering ideas on studied programmatic approaches for judicious utilization of antimicrobial agents, this reference discusses practical means to track intervention outcomes through benchmarking. Authored by experts in their respective fields, the book contains essential principles and practical strategies to optimize the utility of antimicrobial agents in modern inpatient health care settings.

Background
There are well-established international guidelines for the management of febrile infants under 2 months of age. They recommend lumbar puncture (LP), admission and antibiotic treatment for all infants. Well-respected and widely regarded as the most comprehensive text in the field, Antibiotic and Chemotherapy, 9th Edition by Drs. Finch, Greenwood, Whitley, and Norrby, provides globally relevant coverage of all types of antimicrobial agents used in human medicine, including all antiviral, antiprotozoan and anthelmintic agents. Comprehensively updated to include new FDA and EMEA regulations, this edition keeps you current with brand-new information about antiretroviral agents and HIV, superficial and mucocutaneous mycoses and systemic infections, management of the immunocompromised patient, treatment of antimicrobial resistance, plus
coverage of new anti-sepsis agents and host/microbe modulators. Reference is easy thanks to a unique 3-part structure covering general aspects of treatment; reviews of every agent; and details of treatments of particular infections. Offer the best possible care and information to your patients about the increasing problem of multi-drug resistance and the wide range of new antiviral therapies now available for the treatment of HIV and other viral infections. Stay current with 21 new chapters including the latest information on superficial and mucocutaneous mycoses, systemic infections, anti-retroviral agents, and HIV. Get fresh perspectives and insights thanks to 21 newly-authored and extensively re-written chapters. Easily access information thanks to a unique 3-part structure covering general aspects of treatment; reviews of every agent; and details of treatments of particular infections. Apply the latest treatments for anti-microbial organisms such as MRSA, and multi-drug resistant forms of TB, malaria and gonorrhea. Keep up on the latest FDA and EMEA regulations. In order to reduce the number of deaths from severe head injuries, systematic management is essential. This book is a practical, comprehensive guide to the treatment of patients (both adults and children) with such injuries, from the time of initial contact through to the rehabilitation center. Sections are devoted to prehospital treatment, admission and diagnostics, acute management, and neurointensive care and rehabilitation. Evidence-based recommendations are presented for each diagnostic and therapeutic measure, and tips, tricks, and pitfalls are highlighted. Throughout, the emphasis is on the provision of sound clinical advice that will maximize the likelihood of an optimal outcome. Helpful flowcharts designed for use in daily routine are also provided. The authors are all members of the Scandinavian Neurotrauma Committee and have extensive practical experience in the areas they write about. This concise, clinically focused handbook offers a complete overview of bacterial pneumonia and reviews the latest guidelines, treatment options, clinical trials, and management of this disease. The easily accessible text offers infectious disease specialists and other health care workers with an excellent quick reference tool, with full color tables.
and figures enhancing the text further. Pneumonia is a debilitating disease, and can also be a very serious complication of pre-existing lung conditions. Combined with influenza (a predisposing factor) it is the eighth leading cause of death in the United States, such there is a need for physicians to prevent pneumonia by vaccination and hygiene methods, as well as recognizing and treating early. Nosocomial and ventilator-associated pneumonia continue to be a major challenge in the management of intensive care patients. In particular, recent developments in microbial resistance are a cause of great concern. Internationally renowned experts provide comprehensive reviews on all the major topics within the field and, in particular, the recent insights into epidemiology, diagnosis and treatment surrounding this field. This Monograph is an essential reference book for both clinicians and researchers alike on this challenging subject. Acute Medicine offers an accessible and concise guide to the practical management of all acute medical problems likely to be encountered in the emergency department, ambulatory care centre, acute medical unit or on the wards. Reflecting the maturation of acute medicine as a separate specialty, the book is divided into common presentations, specific problems and procedures. New to the fifth edition is a chapter on bed-side ultrasonography; throughout, emphasis is placed on patient safety, and the use of flow diagrams, tables and figures ensures that key information is quickly accessible. Thoroughly revised by experts in the subject, and updated to reflect current approaches to diagnosis and management, Acute Medicine is an excellent companion for the trainee as well as an aide-mémoire for the more experienced physician. 'Up-to-date information. The book is well supplied with references that are easily accessible.' - Doody's Electronic Journal The Guest Editors created a unique focus to the general topic of infectious diseases. They have focused on contemporary management of antibiotics used for procedures and infections. Articles are devoted to: Update on Antibiotic Prophylaxis for GU Procedures in Patients with Artificial Joint Replacement and Artificial Heart Valves; Asymptomatic Bacteriuria; Urinary Tract Infection and Bacteruria
Online Library Antibiotic Guidelines For The Management Of Infection In

in Pregnancy; Resistance Patterns in Contemporary Antibiotics: ESBL and Beyond; UTI and Neurogenic Bladder; Modern Guidelines for Skin and Bowel Prep for Open and Laparoscopic GU Surgery; Work up of Pediatric Urinary Tract Infection; Pre Prostate Biopsy Rectal Culture and Post Biopsy Sepsis; Infection with Foreign Bodies: Mesh and Prostheses; Treatment of the Infected Stone; Sexually Transmitted Infections: Updated Guidelines and Treatment; Bacteruria/UTI in the Elderly; Treatment of Fungal Urinary Tract Infection; and STDs. This book is open access under a CC BY 4.0 license. It constitutes a unique source of knowledge and guidance for all healthcare workers who care for patients with sepsis and septic shock in resource-limited settings. More than eighty percent of the worldwide deaths related to sepsis occur in resource-limited settings in low and middle-income countries. Current international sepsis guidelines cannot be implemented without adaptations towards these settings, mainly because of the difference in local resources and a different spectrum of infectious diseases causing sepsis. This prompted members of the Global Intensive Care working group of the European Society of Intensive Care Medicine (ESICM) and the Mahidol-Oxford Tropical Medicine Research Unit (MORU, Bangkok, Thailand) - among which the Editors - to develop with an international group of experts a comprehensive set of recommendations for the management of sepsis in resource-limited settings. Recommendations are based on both current scientific evidence and clinical experience of clinicians working in resource-limited settings. The book includes an overview chapter outlining the current challenges and future directions of sepsis management as well as general recommendations on the structure and organization of intensive care services in resource-limited settings. Specific recommendations on the recognition and management of patients with sepsis and septic shock in these settings are grouped into seven chapters. The book provides evidence-based practical guidance for doctors in low and middle-income countries treating patients with sepsis, and highlights areas for further research and discussion. Diagnosis and Treatment in Internal Medicine equips trainee doctors
with the essential skills and core knowledge to establish a diagnosis reliably and quickly, before outlining the management of the clinical condition diagnosed. Organised into three sections, the first provides a vital overview, whilst the second focuses on common presentations and diagnoses. Uniquely, this new book shows readers how to turn symptoms into a list of diagnoses ordered by probability - a differential diagnosis. Experienced consultants who teach trainees every day demonstrate how to derive an ordered differential diagnosis, how to narrow this down to a single diagnosis and if not, how to live with diagnostic uncertainty. The final section provides a comprehensive account of the management of system-based syndromes and diseases. Highly-structured chapters emphasize how common conditions present, how to approach a diagnosis, and how to estimate prognosis, treatment and its effectiveness. An onus is placed on the development of crucial diagnostic skills and the ability to devise evidence-based management plans quickly and accurately, making this an ideal text for core medical trainees. This issue provides fully updated information on respiratory infections, including healthcare associated pneumonia, new diagnostic tests for pneumonia, epidemic viral pneumonia and other emerging pathogens, biomarkers to optimize antibiotic therapy for pneumonia, pharmacokinetics and pharmacodynamics to improve management of pneumonia. Nosocomial tracheobronchitis and bronchiectasis are also discussed. Articles on CAP and VAP, including an examination of the impact of guidelines on outcomes, de-escalation therapy, inhaled antibiotic therapy and prevention of VAP are also included. This volume examines many of the crucial issues of resistance in a clinical context, with an emphasis on MRSA; surely the greatest challenge to our antibiotic and infection control policies that modern health care systems have ever seen. Other chapters explore the psychology of prescribing, modern management techniques as an adjunct to antibiotic policies, and the less obvious downsides of antibiotic use. This book discussed the treatment of community-acquired pneumonia, and hospital-acquired pneumonia, when to hospitalize a patient, methods for identifying low-risk CAP patients,
switch and step-down therapy, approach to nonresolving pneumonia, management of parapneumonic effusions, empyema, and chronic bronchitis are discussed. The various antimicrobial agents are reviewed in detail with suggested treatment regimens. Antimicrobial resistance (AMR) challenges the treatment of clinical infections. Despite the decline in infectious diseases mortality rates, infections are more difficult to eliminate or contain in the host, resulting in poorer outcomes to treatment, longer hospital inpatient stays, and increased mortality. Written by international experts in the field and supported by the review of the available evidence, including example case studies, Antimicrobial Stewardship provides a practical how-to guide on this growing area. Divided into three sections, the first sets the scene, looking at the key problems of antimicrobial resistance. Section two examines and identifies the key components of an antimicrobial stewardship program. Finally, the book explores specialist areas of antimicrobial stewardship ranging from antimicrobial pharmacokinetics and dynamics, to near patient testing, and infection biomarkers. Antimicrobial Stewardship will be a valuable and practical resource for infection trainees, as well as specialists from the medical, pharmacy, and nursing professions. Although most clinicians are aware of the problem of antimicrobial resistance, most also underestimate its significance in their own hospital. The incorrect and inappropriate use of antibiotics and other antimicrobials, as well as poor prevention and poor control of infections, are contributing to the development of such resistance. Appropriate use of antibiotics and compliance with infection prevention and control measures should be integral aspects of good clinical practice and standards of care. However, these activities are often inadequate among clinicians, and there is a considerable gap between the best evidence and actual clinical practice. In hospitals, cultural determinants influence clinical practice, and improving behaviour in terms of infection prevention and antibiotics-prescribing practice remains a challenge. Despite evidence supporting the effectiveness of best practices, many clinicians fail to implement them, and evidence-based processes and practices that are known to
optimize both the prevention and the treatment of infections tend to be underused. Addressing precisely this problem, this volume offers an essential toolkit for all surgeons and intensivists interested in improving their clinical practices. GUIDELINES Pocketcards are multifold pocketcards containing society-endorsed, evidence-based treatment guidelines in a brief algorithmic format that is most preferred by practising clinicians, quality managers, nurses, educators, and medical students. The Outpatient Community-Acquired Pneumonia GUIDELINES Pocketcard is endorsed by the Infectious Diseases Society of America (IDSA) and the American Thoracic Society (ATS), and is based on the latest IDSA/ATS guidelines. This practical quick-reference tool contains screening, severity assessment instruments, diagnostic and treatment recommendations, an initial management algorithm, and drug therapy and dosing information. It provides all that is needed to make accurate clinical decisions at the point of care including key points; diagnostic management criteria; disease assessment; severity criteria; initial management algorithm; initial empirical antibiotic therapy; recommended antimicrobials; current medication tables with brand and generic names; and detailed drug information including strengths, formulations, and comments. Applications include point-of-care, education, QI interventions, clinical trials, medical reference, and clinical research. Copyright code: 82b5d87d904a18d72251474e98470c39