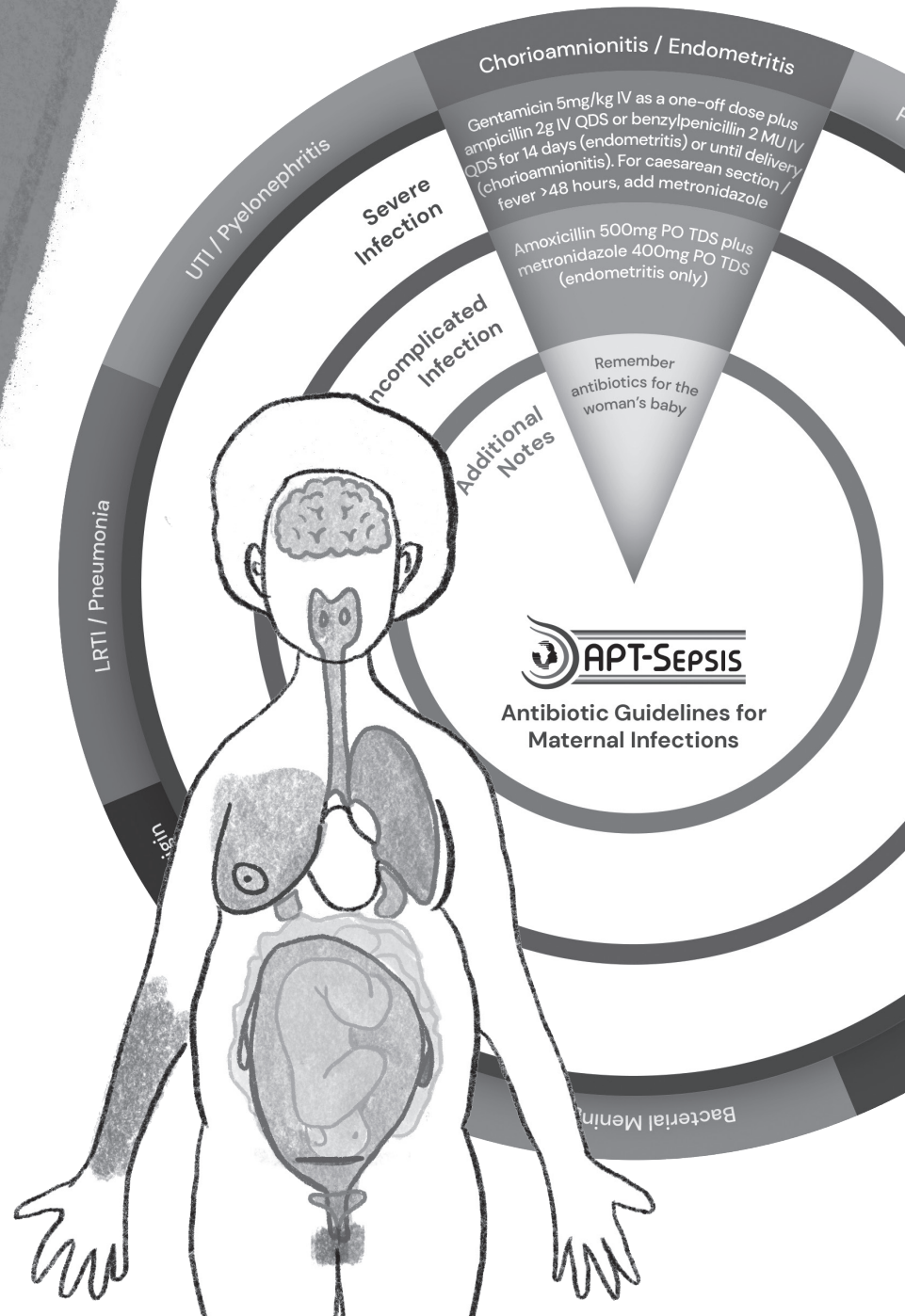


# Treat infections early to prevent sepsis



## USE THE CORRECT ANTIBIOTICS FOR THE CORRECT DURATION

Source of infection	Treatment of severe infection	Treatment of non-severe infection
LRTI / Pneumonia	Ceftriaxone 2g IV OD for 5 days, plus erythromycin 500mg PO QDS if an atypical pneumonia is suspected	Amoxicillin 500mg–1g PO TDS or erythromycin 500mg PO QDS for 5 days
UTI / Pyelonephritis	Ceftriaxone 1g IV OD until afebrile for 24 hours, plus a one-off dose of gentamicin 5mg/kg if haemodynamically unstable: then cefixime 200mg PO BD or amoxicillin 1g PO TDS for 10–14 days total	Cephalexin 500mg PO QDS or amoxicillin 500mg PO TDS or ciprofloxacin 500mg PO BD or nitrofurantoin 100mg PO QDS for 5–7 days
Chorioamnionitis / Endometritis	Gentamicin 5mg/kg IV as a one-off dose plus ampicillin 2g IV QDS or benzylpenicillin 2 MU IV QDS for 14 days (endometritis) or until delivery (chorioamnionitis)  For caesarean section / fever >48 hours, add metronidazole	Amoxicillin 500mg PO TDS plus metronidazole 400mg PO TDS (endometritis only)
Post-Abortion Complications	Ceftriaxone 2g IV OD plus metronidazole 500mg IV TDS for at least 48 hours: then doxycycline 100mg PO BD plus metronidazole 400mg PO TDS for 7 days total	Doxycycline 100mg PO BD for 7 days plus a one-off dose of metronidazole 800mg PO
Cellulitis / Wound Infection	Ceftriaxone 1g IV OD for 3 days: then cloxacillin 500mg PO QDS or doxycycline 100mg BD PO for 7–10 days total  For perineal or superficial caesarean section wound infections, add metronidazole 400mg PO TDS	Cloxacillin 500mg PO QDS or doxycycline 100mg BD PO for 7 days
Mastitis	Ceftriaxone 1g IV OD until clinical improvement: then cloxacillin 500mg PO QDS or cefalexin 500mg PO QDS or amoxicillin 500mg PO TDS for 7 days total	Cloxacillin 500mg PO QDS or cefalexin 500mg PO QDS or amoxicillin 500mg PO TDS for 7 days
Bacterial Meningitis	Ceftriaxone 2g IV BD for 10–14 days	Not applicable: always treat as severe infection
Maternal Sepsis of Unknown Origin	Ceftriaxone 2g IV OD, plus a one-off dose of gentamicin 5mg/kg IV if haemodynamically unstable, plus metronidazole 500mg IV TDS	Not applicable: always treat as severe infection

- If the recommended antibiotics are not available, or your patient is not clinically improving after 48 hours, seek medical advice from a senior clinical decision-maker.
- These recommendations are based upon the antimicrobial guidelines from the Ministries of Health in Malawi and Uganda and may change: please consider up-to-date guidance accordingly.

