

**This patient has *Staphylococcus aureus* Bacteraemia (SAB)**  
associated mortality is high - complete clinical management checklist below  
**AND ensure patient receives ≥ 14 days IV Rx**

*To be completed by medical staff*                      *Please initial and date when completed*

- |   |                      |
|---|----------------------|
| 1. Identify and record source of SAB                      | <input type="text"/> |
| 2. Perform ECHO   | <input type="text"/> |
| 3. Remove infected / suspect vascular devices             | <input type="text"/> |
| 4. Discuss management with an Infection Specialist        | <input type="text"/> |
| 5. Prescribe a minimum of 14 days of IV antibiotics       | <input type="text"/> |
| 6. Follow-up blood cultures at 48-96 hours post treatment | <input type="text"/> |

Adults:    **IV Flucloxacillin 2g 6 hourly or**  
if **MRSA** or **TRUE penicillin allergy: IV Vancomycin**

**Vancomycin** (intermittent infusion) trough concentration target range: 15-20 mg/L  
*Please refer to NHSGGC Staphylococcus aureus management guidelines*  
*refer to OPAT if patient is improved and considered suitable for discharge*

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