

**TREATMENT OF NEONATAL SEPSIS****AGE, first 3DAYS – MATERNAL RISK FACTORS**

Any of the two factors are indication for treatment

- Maternal fever
- Foul smelling or purulent amniotic fluid
- PROM >18hours

**INDICATIONS – Breathing difficulty**

- RR >60/min
- Recession
- Grunting

**INDICATIONS – Any TWO of the following signs**

- Fast breathing – RR >60/min
- Axillary temperature <36.5°C OR >37.5°C
- No feeding or poor feeding after having had fed well before
- Abdominal distension and/or Vomiting
- Convulsions
- Unconsciousness or Lethargic (no spontaneous movements)

**Management**

- Neutral Airway& Breathing support if needed
- Circulation (IV cannula, Blood sugar FBC, BC, Blood film, Clotting profile, Grouping Rh)
- IV antibiotics (C Penicillin & Gentamicin)
- Measure Temperature
- Capillary blood gas
- IV fluids (bolus / maintenance)
- Nil orally OR consider feeding
- Consider lumbar puncture (Cell count, Gram stain Sugar / Blood sugar, Culture & sensitivity, Antigens )

**Sepsis**

- Ampicillin (or penicillin) and gentamicin
- Add Flucloxacillin (instead of penicillin) if Staphylococcus is suspected (as described above).
- If Meningitis is suspected add Cefotaxime / replace gentamicin with Cefotaxime
- Assess the baby every 6 hours for signs of improvement

**At 72 hours with the availability of blood culture**

- If positive change antibiotics according to sensitivity