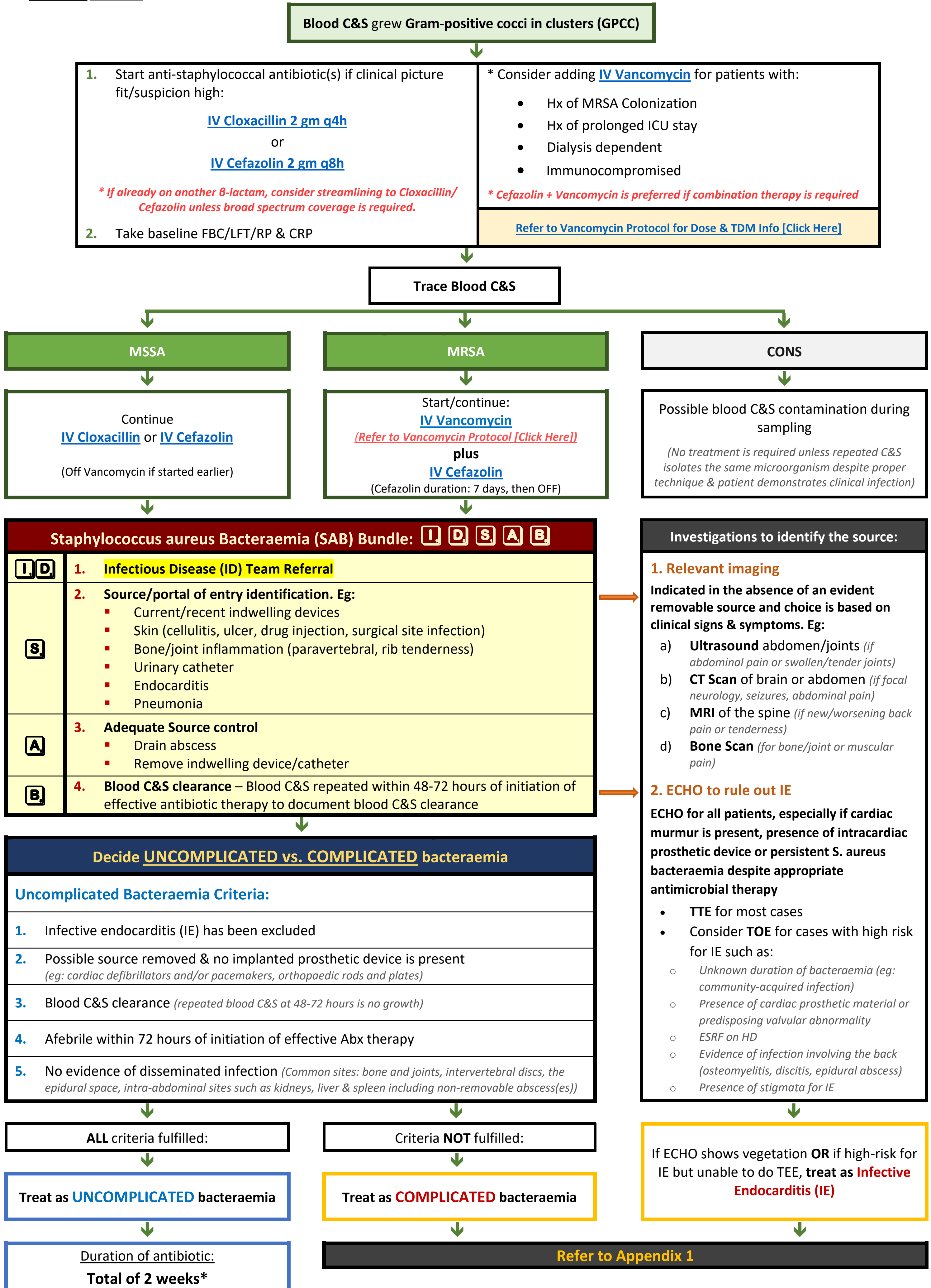
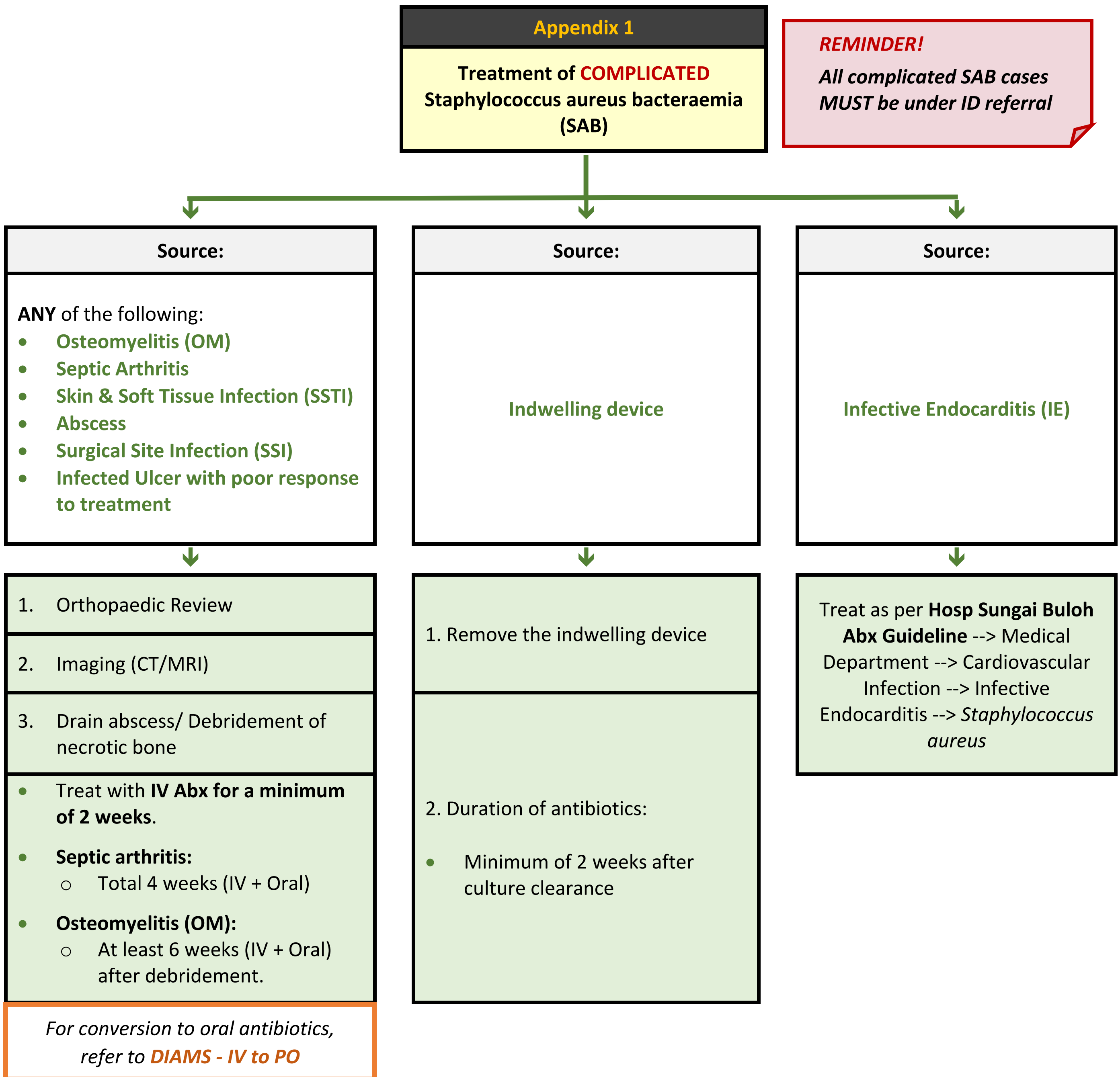
MoCHIs (Management of Common HSgB Infections):
HSgB algorithm for suspected or confirmed Staphylococcus aureus bacteraemia (SAB)



* *HSgB ID consultants' consensus based on expert opinion.*

Appendix 1: Treatment of COMPLICATED MSSA/MRSA bacteraemia



*** For patients requiring longer IV Abx therapy, consider OPAT (Out-patient Antibiotic Therapy)*
→ Refer to ID Team to assess suitability for OPAT.

ALL PATIENTS NEED FOLLOW-UP FOR RELAPSE BY THE PRIMARY TEAM
Arrange clinical review 4 weeks following completion of antibiotic therapy

References:

- Staphylococcus aureus Bacteraemia (SAB) Management Clinical Guideline, Government of South Australia
- Alosaimy et al. Standardized Treatment and Assessment Pathway Improves Mortality in Adults with Methicillin-resistant Staphylococcus aureus Bacteremia – STAPH-Study
- UMMC MSSA/MRSA Bacteremia Clinical Pathway

Prepared by:
HSgB AMS Pharmacists (Izyana Munirah Idham, Hannah Md Mahir, Adam Ashraf Jaafer & Tan Wai Leong) & ID Consultant (Dr Nor Arisah Misnan)

Appendix 2:

Antibiotic doses for MSSA/MRSA Bacteremia Treatment

DRUG(S)	USUAL DOSE	DOSAGE ADJUSTMENT IN RENAL INSUFFICIENCY	
		CrCl (mL/min)	DOSE
Cloxacillin	**If ANY of the following is present:** ○ **Severe/extensive infection** ○ **Critical illness/septic shock** ○ **Infective endocarditis (IE)** ○ **CNS infection** ○ **Hypoalbuminemia/burn patients** • Cloxacillin 2 gm IV q4h ** If blood C&S clearance achieved, source is removed, no deep-seated infection, no hypoalbuminaemia, may consider using:* • Cloxacillin 2 gm IV q6h	N/A	No dosage adjustment required
Cefazolin	**Normal dose:** • Cefazolin 2 gm IV q8h **Obese patients:** • Cefazolin 2 gm IV q6h (max dose)	10-50	2 gm IV q12h
		< 10	1 gm IV q24h
		HD	**In-patients:** 2 gm stat, then 1 gm IV q24h *(If on HD days, to serve post-dialysis)* **Out-patients:** 2 gm / 2 gm / 3 gm IV post-dialysis
Vancomycin	[Refer to Hospital Sungai Buloh Vancomycin Protocol [Click Here]]		

Prepared by:
HSgB AMS Pharmacists (Izyana Munirah Idham, Hannah Md Mahir, Adam Ashraf Jaafer & Tan Wai Leong) & ID Consultant (Dr Nor Arisah Misnan)