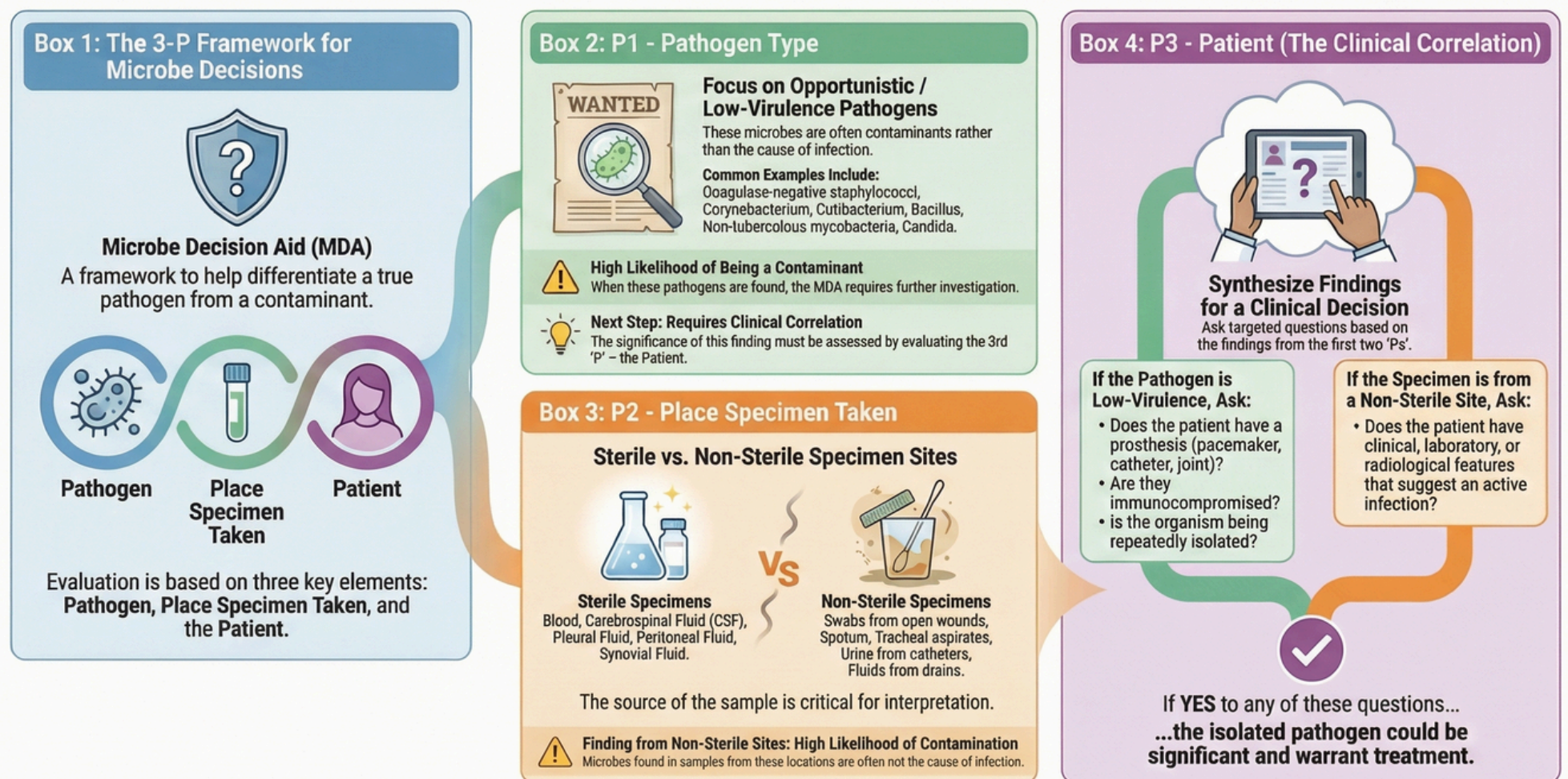




IS ANTIBIOTIC NEEDED?

The Microbe Decision Aid (MDA): A 3-P Framework for Clinical Decisions





IS ANTIBIOTIC NEEDED?

A Quick Guide to Antibiotic Decisions: The Clinical Decision Aid (CDA)

ASSESS HOST RESPONSE (How sick is the patient?)



LOW Suspicion of Infection

- The patient is clinically well.
- Signs include no fever, normal white blood cell count (WBC), and stable condition.
- Inflammatory markers are not elevated.



MILD/MODERATE Suspicion of Infection (The 'Grey Area')

- There is a clinical or radiological suspicion of infection.
- Signs include a mild to moderate elevation of inflammatory markers.



HIGH Suspicion of Infection (Sepsis)

- There is frank clinical/radiological evidence of infection. Signs include markedly elevated inflammatory markers (like PCT), septic shock, or new organ damage (increase in SOFA score ≥ 2).

COMBINE WITH MICROBIOLOGY & DETERMINE ACTION



IF Host Response is LOW...

REGARDLESS of microbiology results (even a 'true pathogen'), the action is to **STOP**. This is considered **colonization, not infection**. Do not treat.



IF Host Response is MILD/MODERATE... and a TRUE Pathogen is found...

The action is to **TREAT** with targeted antimicrobials. There is a high likelihood of infection.



IF Host Response is MILD/MODERATE... and a WEAK/NO Pathogen is found...

The action is to **DECIDE BASED ON RISK**.
For a High-Risk Patient, provide empiric treatment.
For a Low-Risk Patient, watch and wait.

Who is a High-Risk Patient?

Patients in shock, with worsening organ damage (SOFA score increase ≥ 2), or who are immunocompromised.

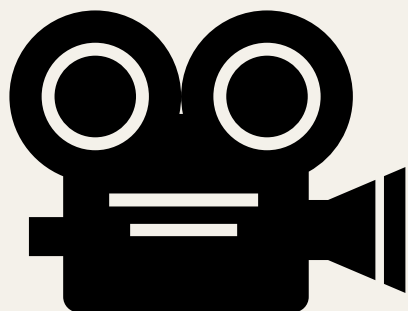


IF Host Response is HIGH...

The action is to **TREAT IMMEDIATELY**. If a bug is found, use targeted therapy. If no bug is found, use empiric therapy. This confirms infection, even if the organism is uncertain.

NotebookLM

ADDITIONAL INFO



VIDEO



VISUAL SUMMARY