

Summary of antimicrobial prescribing guidance – managing common infections

- For all PHE guidance, follow [PHE's principles of treatment](#).
- See BNF for appropriate use and dosing in specific populations, for example, hepatic impairment, renal impairment, pregnancy and breastfeeding.

Key: Click to access doses for children Click to access NICE's printable visual summary

Infection	Key points	Medicine	Doses		Length	Visual summary	
			Adult	Child			
▼ Eye infections							
Conjunctivitis Public Health England Last updated: July 2019	First line: bath/clean eyelids with cotton wool dipped in sterile saline or boiled (cooled) water, to remove crusting. ^{1D} Treat only if severe, ^{2A+} as most cases are viral ^{3D} or self-limiting. ^{2A+} Bacterial conjunctivitis: usually unilateral and also self-limiting. ^{2A+,3D} It is characterised by red eye with mucopurulent, not watery discharge. ^{3D} 65% and 74% resolve on placebo by days 5 and 7. ^{4A-,5A+} Third line: fusidic acid as it has less Gram-negative activity. ^{6A-,7D}	Second line: chloramphenicol ^{1D,2A+,4A-,5A+} 0.5% eye drop ^{1D,2A+} OR 1% ointment ^{1D,5A+}	Eye drops: 2 hourly for 2 days, ^{1D,2A+} then reduce frequency ^{1D} to 3 to 4 times daily. ^{1D} Eye ointment: 3 to 4 times daily or once daily at night if using antibiotic eye drops during the day. ^{1D}		48 hours after resolution ^{2A+,7D}	Not available. Access supporting evidence and rationales on the PHE website	
		Third line: fusidic acid 1% gel ^{2A+,5A+,6A-}	BD ^{1D,7D}				
Blepharitis Public Health England Last updated: Nov 2017	First line: lid hygiene ^{1D,2A+} for symptom control, ^{1D} including: warm compresses; ^{1D,2A+} lid massage and scrubs; ^{1D} gentle washing; ^{1D} avoiding cosmetics. ^{1D} Second line: topical antibiotics if hygiene measures are ineffective after 2 weeks. ^{1D,3A+} Signs of meibomian gland dysfunction, ^{3D} or acne rosacea. ^{3D} consider oral antibiotics. ^{1D}	Second line: topical chloramphenicol ^{1D,2A+,3A-}	1% ointment BD ^{2A+,3D}		6-week trial ^{3D}	Not available. Access supporting evidence and rationales on the PHE website	
		Third line: oral oxytetracycline ^{1D,3D} OR	500mg BD ^{3D} 250mg BD ^{3D}				4 weeks (initial) ^{3D} 8 weeks (maint) ^{3D}
		oral doxycycline ^{1D,2A+,3D}	100mg OD ^{3D} 50mg OD ^{3D}				4 weeks (initial) ^{3D} 8 weeks (maint) ^{3D}

Abbreviations
BD, twice a day; eGFR, estimated glomerular filtration rate; IM, intramuscular; IV, intravenous; MALToma, mucosa-associated lymphoid tissue lymphoma; m/r, modified release; MRSA, methicillin-resistant Staphylococcus aureus; MSM, men who have sex with men; stat, given immediately; OD, once daily; TDS, 3 times a day; QDS, 4 times a day