



My Patient has Endocarditis – are they suitable for OPAT?

You have decided that your patient is suitable for OPAT based on standard criteria. Now you must determine that your patient's condition is suitable for OPAT.

At this point your patient has been diagnosed with endocarditis by satisfying standard criteria e.g. Dukes Criteria. They will already be receiving a course of antibiotics as advised by your local ID/OPAT/Microbiologist team, with a treatment plan including treatment duration in place.

A patient with Endocarditis should **not be sent home** on OPAT if any of the following are happening:

- Ongoing high fevers
- Persistently positive blood cultures
- Concern for septic embolisation ongoing
- Ongoing systemic upset with hypotension and tachycardia
- Systemic upset that has not yet resolved e.g. renal function
- Ongoing assessment by the Cardiothoracic surgeons regarding the potential for CT surgery and the need for valve replacement
- Ongoing symptoms of heart failure, palpitations, or ECG abnormalities

The treatment duration for Endocarditis is typically 2-6 weeks depending on the clinical scenario, valve affected, microbiology results, and the clinical response. There will be protocols in your hospital for which antibiotics should be used in this setting. The antibiotic choice will be dependent on the microbiology results from your patients' blood and urine cultures and local antibiotic susceptibility tables. For further advice regarding antibiotic choice please contact your local ID/OPAT/Microbiology team.

Your patient will need to be reviewed on a weekly basis while receiving OPAT. **If your patient is being prescribed a treatment course that is longer than 2 weeks, they must be reviewed with your regional OPAT center.**