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Altri autori (Persone)	WinterBob PaulMical
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Nota di contenuto	; Chapter 1: Basic Microbiology and Infection -- ; Chapter 2: Physiology of Sepsis and Its Implications -- ; Chapter 3: Principles of Infection Prevention and Control -- ; Chapter 4: Microbiology Laboratory Diagnosis of Infection -- ; Chapter 5: Principles of Treatment : Decision Making -- ; Chapter 6: Lower Respiratory Tract Infections -- ; Chapter 7: Cardiovascular Infections -- ; Chapter 8: Abdominal Infections -- ; Chapter 9: Soft Tissue, Trauma and Orthopedic Infections -- ; Chapter 10: Immunocompromised Patients -- ; Chapter 11: Infections of the Nervous System -- ; Chapter 12: Obstetrical and Gynecological-Related Infections. Respiratory ManagementCardiovascular Management; Protein C; Steroids; Glycaemic Control; Healthcare Bundles; References; Chapter 3: Principles of Infection Prevention and Control; Overview; Standard and Transmission-Based Precautions; Standard Precautions; Hand Hygiene; Protective Clothing; Safe Disposal of Sharps/Waste and Laundry; Environmental Decontamination; Decontamination of Patient Equipment; Patient Isolation or Cohorting; Transmission-Based Precautions; Airborne Precautions; Droplet Precautions; Contact Precautions; Facility Design and Physical Resources Protection of the Healthcare Worker and Occupational HealthAntibiotic Stewardship; Specific Organisms; Methicillin-Resistant Staphylococcus aureus (MRSA); Vancomycin-Resistant Enterococci (VRE); Clostridium

difficile; Multi-drug Resistant Acinetobacter baumannii; Multi-drug-Resistant Enterobacteriaceae; Preventing Specific Infections; Urinary Tract Infection; Catheter-Related Bloodstream Infection; Ventilator-Associated Pneumonia; References; Chapter 4: Microbiology Laboratory Diagnosis of Infection; Diagnosis of Infection: Approach and Samples; Microscopy; Culture; Antigen/Antibody Detection Molecular and Other Non-culture TechniquesAntimicrobial Susceptibility Testing; References; Chapter 5: Principles of Treatment: Decision Making; Antibiotic Decision-Making; Diagnosing Sepsis; Clinical Features; Inflammatory Markers; Rapid Microbiology Diagnostics; Benefit and Harms of Empirical Antibiotic Treatment; Choosing the Correct Antibiotic; Pathogen Distribution; Pharmacokinetic Considerations; Promoting Antibiotic Resistance; Potential Adverse Events; Severity of Illness and the De-Escalation Strategy; Antibiotic Decision Making; Beta-Lactam-Aminoglycoside Combination Treatment Continuous Versus Bolus Antibiotic AdministrationAntibiotic Dosing; Antibiotic Drug Level Monitoring; Duration of Antibiotic Treatment; Antibiotic and Antifungal Prophylaxis; Selective Digestive Decontamination; Prophylaxis and Empirical Therapy for Candidemia; New Antimicrobials; Gram-Positive Infections; New Cephalosporins; Lipoglycopeptides; Lipopeptide (Daptomycin); Linezolid; Quinupristin-Dalfopristin; Summary of New Antibiotics against Gram-positive Infections; Gram-Negative Infections; Doripenem; Glycylines (Tigecycline); Colistin; Antifungals; Azoles; Echinocandins; References

Sommario/riassunto

Infections in critically ill patients are more common than in most other parts of the hospital, and are often the most complicated to manage. Underlying disease and the reasons for admission make the diagnosis, management and prevention of infection challenging. Developments in technology, the treatment of previously untreatable malignancies, complex surgery procedures, and an increasing age profile result in more patients vulnerable to infection and a greater number of patients needing critical care support. Infections in the Adult Intensive Care Unit is designed to help trainee and practising physician, surgeon or other medical professional manage the acutely ill patient in the critical care unit, before transfer from the emergency department, or on the hospital ward where effective management may avoid admission to the critical care unit. It has been co-authored by a clinical microbiologist, intensivist and clinical infectious diseases physician to cover some of the major infections presenting in the adult critical care unit. It provides broad principles to be used based on the latest evidence combined with common sense and the results of many years of combined experience.
