

THE PATHWAY TO PRESCRIPTION IS COMPLICATED

...Especially for Sepsis Patients



39-year-old woman with history of ovarian cysts and pyelonephritis exhibiting symptoms of fever and urinary discomfort.



Patient goes to Emergency Room.



Patient is started on broad spectrum antibiotic Ceftriaxone, but symptoms continue to worsen.



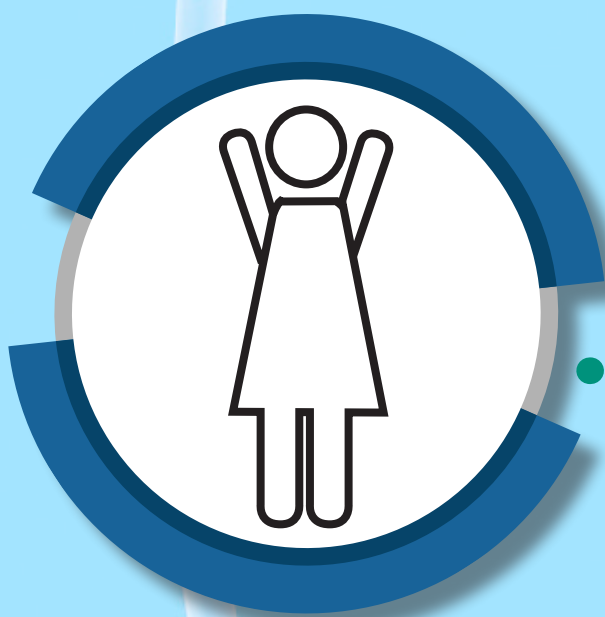
Patient is admitted and suspected to be septic based on initial labs→ Sepsis bundle initiated.



Beckman Coulter MicroScan platform results confirm that an ESBL-producing organism is causing the infection. The isolate was identified to be susceptible to meropenem and trimethoprim-sulfamethoxazole but intermediate to ceftriaxone.



Patient is switched to meropenem.



Patient symptoms improve and she is discharged on oral antibiotics.

With increasing frequency, UTIs caused by ESBL-producing Enterobacterales are seen in outpatients with no previous healthcare exposures.¹

Beckman Coulter's MicroScan panels feature drugs recommended by IDSA* and the ECDC** to treat pyelonephritis and complicated urinary tract infections caused by ESBLs which include: ertapenem, meropenem, imipenem-cilastatin, ciprofloxacin, levofloxacin and trimethoprim-sulfamethoxazole.²

To learn more about how beckman coulter's solutions can impact sepsis patient management in your facility, click the link below:

LEARN MORE



1. CDC. 2019. Antibiotic Resistance Threats in the United States; <https://www.cdc.gov/drugresistance/biggest-threats.html#extend>
2. World Health Statistics 2022, pg. 33
*IDSA- Infectious Disease Society of America
**ECDC- European Centre for Disease Prevention and Control
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