

Impetigo Standing Order

Issue date:		Review date:	
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This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

Standing Order Name	Impetigo
Rationale	To ensure prompt and appropriate treatment of impetigo to help prevent spread.
Scope (condition and patient group)	Adults and children who are diagnosed as having impetigo.
Red Flags	Systemic infection and painful lesions
Assessment	<p>1. Bullous and non-bullous are the two types of impetigo. Non-bullous (most common) lesions begin as a vesicle that ruptures and the contents dry to form a gold-coloured plaque. These lesions are often 2 cm in diameter and most frequently affect the face (especially around the mouth and nose) and limbs.</p> <p>2. Systemic signs are usually not present however with extensive impetigo, fever and regional lymphadenopathy may occur.</p> <p>3. Impetigo is usually diagnosed clinically and treatment decisions are rarely based on the results of skin swabs.</p> <p>4. Swabs may be required for recurrent infections, treatment failure with oral antibiotics or where there is a community outbreak and the cause needs to be identified. For recurrent impetigo nasal swabs can identify staphylococcal nasal carriage requiring specific management.</p>
Indication	Topical antiseptic cream for treatment of minor skin lesions
Medicine	Hydrogen peroxide 1% (crystaderm)
Dosage instructions	Apply to lesions 2-3 x daily for 7 days.
Route of administration	Topical
Quantity to be given	1 x original pack
Contraindications	Hypersensitivity to hydrogen peroxide
Precautions	<ul style="list-style-type: none"> Avoid in eyes and healthy skin Bleaches fabric
Indication	Antibiotics for extensive lesions, topical treatment failure or where systemic symptoms are present
Medicine	Flucloxacillin
Dosage instructions	<p><u>Adult</u>: 500mg FOUR times daily for 7 days</p> <p><u>Child</u>: 12.5mg/kg FOUR times daily for 7 days</p>
Route of administration	Oral
Quantity to be given	7 days
Contraindications	Allergy to penicillin; history of hepatic dysfunction associated with flucloxacillin
Precautions	<ul style="list-style-type: none"> History of allergies Hepatic impairment
Indication	Antibiotics for extensive lesions, topical treatment failure or where systemic symptoms are present and patient is allergic to penicillin
Medicine	Erythromycin eythylsuccinate
Dosage instructions	<p><u>Adult</u>: 800mg TWICE daily for 7 days</p> <p><u>Child</u>: 20mg/kg TWICE daily for 7 days</p>
Route of administration	Oral

Quantity to be given	7 days
Contraindications	It is not suitable for infants < 1 month of age due to the risk of hypertrophic pyloric stenosis Concomitant colchicine in patients with renal or hepatic impairment
Precautions	<ul style="list-style-type: none"> • Warfarin—monitor INR 3 days after starting antibiotics • Multiple drug to drug interactions- check
Additional information	<p>If parents or patients want to remove crusts they may do so by soaking a clean cloth in a mixture of ½ cup of white vinegar in 1 litre of tepid water and apply cloth to area for 10 minutes before gently wiping away crusts.</p> <p>Advise of the following due to the highly contagious nature of impetigo</p> <ul style="list-style-type: none"> • Wash hands after contact with lesions • Avoid close contact with others • Use separate towels and face cloths • Children should stay away from school or day care until lesions have crusted over or antibiotics have been given >24 hours
Follow-up	<p>Patients or parents should be advised to return for re-assessment if:</p> <ul style="list-style-type: none"> • the lesions are not healing following the course of antibiotic treatment (healing lesions will be dry) • the lesions continue to spread or become painful • development of systemic symptoms, such as fever.
Countersigning and auditing	<p>Countersigning is not required. Audited monthly.</p> <p>OR</p> <p>Countersigning is required within XX days</p>
Competency/training requirements	All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training in this standing order.
Supporting documentation	<p>Healthpathways at www.healthpathways.org.nz</p> <p>Best Practice Journal at www.bpac.org.nz</p> <p>New Zealand Formulary at www.nzf.org.nz</p> <p>Individual medicine data sheets at www.medsafe.govt.nz</p> <p>Standing Order Guidelines, Ministry of Health, 2012</p> <p>Medicines (Standing Order) Regulations 2012 (Standing Order Regulations)</p>
Definition of terms used in standing order	None

Medical Centre or Clinic:	
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Signed by issuers

Name: _____

Signature: _____

Title: _____

Date: _____

Nurses operating under this standing order

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____