

Addendum to Operational Guidelines on Use of Gentamicin by ANMs for Management of Sepsis in Young Infants under Specific Situations

Sepsis is one of the leading cause of death in young infants although it can be managed with timely identification and rational use of antibiotics. To improve access of a sick newborn to the prompt treatment, Ministry of Health & Family Welfare, Government of India implemented IMNCI (Integrated Management of Newborn and Childhood illnesses) training for the OPD management and F-IMNCI (Facility Based Integrated Management of Neonatal and Childhood illness) training package for the indoor patient management of the common newborn and childhood illnesses.

Further in this regard in 2014, MOHFW disseminated "Operational Guidelines on Use of Gentamicin by ANMs for Management of Sepsis in Young Infants under specific situations" to states. This guideline empowered ANMs to use Oral Amoxicillin and Injectable Gentamicin for management of cases of suspected sepsis in a newborn where referral is not feasible or refused by families/caregivers.

This addendum is being disseminated with the following objectives:

- Updating the trainers and trainees on the revised signs of recognition of Possible Serious Bacterial Infection (PSBI) and treatment in the cases where referral is not possible by medical officers in primary health care settings
- Reiterating the roles of ANM & ASHA in providing a continuum of care to the young infant in detecting, referring and managing young infant with PSBI.

All the Child health related Program managers, Medical officers, Staff nurses, ANMs and ASHA workers will require orientation on this guideline. The facilitator guidance note and video along with the Operational Guidelines on "Use of Gentamicin by ANMs for Management of Sepsis in Young Infants under specific situations" is to be used for orienting the providers using participatory methodology. The orientation of health staff can be done during routine monthly meetings.

It is expected that with wide dissemination of this guideline to state/districts will be able to address the issue of management of sepsis in young infant where referral is not feasible or refused. This is expected to expedite the pace of implementation of this important intervention and regular reporting as detailed in the operational guidelines will also continue.

1. Revised list of signs for classifying young infants as PSBI is as under

- Not able to feed
- Convulsions
- Fast breathing (60 breaths per minute or more)
- Severe chest indrawing
- Axillary temperature 37.5°C or above (or feels hot to touch)
- Axillary temperature less than 35.5°C (or feels cold to touch)
- Movement only when stimulated or no movement at all.

Classify young infant as PSBI if one or more of the above signs are present

All levels of health care workers need to use these signs for detecting Possible Serious Bacterial Infection (PSBI) in the outpatient management of cases. This will ensure uniformity in classifying the severity of illness and avoid unnecessary delays.

2. Role of Medical Officers in managing sepsis in young infant

As per IMNCI, medical officers after classifying young infants with PSBI need to refer the babies for getting treatment at a higher facility and indoor admission only after giving pre-referral dose of Inj. Ampicillin/ Oral Amoxicillin and Gentamicin. (Refer to Annexure for dosages).

In situations where referral is not feasible or refused, medical officers will continue outpatient treatment with Oral Amoxicillin and Injection Gentamicin for 7 days after filling the treatment card.

It is again emphasized that ANM will continue to facilitate the completion of the treatment as mentioned in the discharge/ outpatient ticket.

