Guidelines for Infectious Disease Consultation

1. In order to help us provide timely consultation, please call with routine requests between 8:30 am and 3:00 pm on weekdays, and by noon on weekends. Routine consultations requested after these times may not be performed until the following day.

2. Consultation is strongly encouraged for:
   a. All patients with Staph aureus in their blood (MRSA or MSSA)
   b. All patients with HIV infection. At a minimum, any antiretroviral agents being given should be reviewed by ID, even if the patient is here for other issues.

3. If infectious disease involvement is desired for patients with chronic osteomyelitis who may be going home on IV antibiotics, please request consultation early in the hospitalization so that the infectious disease physician can help plan the work-up and treatment plan.

4. The Infectious Disease service does not consult solely for the purpose of monitoring patients on home IV antibiotics. Such monitoring can be done by the PCP or other providers seeing the patient, and does not in itself require ID involvement. ID consultation is for the purpose of helping formulate a treatment plan, not for monitoring a treatment plan that others have put into place.

5. The initial work-up of fever or leukocytosis, including any urgent interventions for sepsis, is the responsibility of the attending service. This includes obtaining any necessary cultures prior to the administration of antibiotics and ordering initial diagnostic tests in order to avoid delay in the work-up of infections.