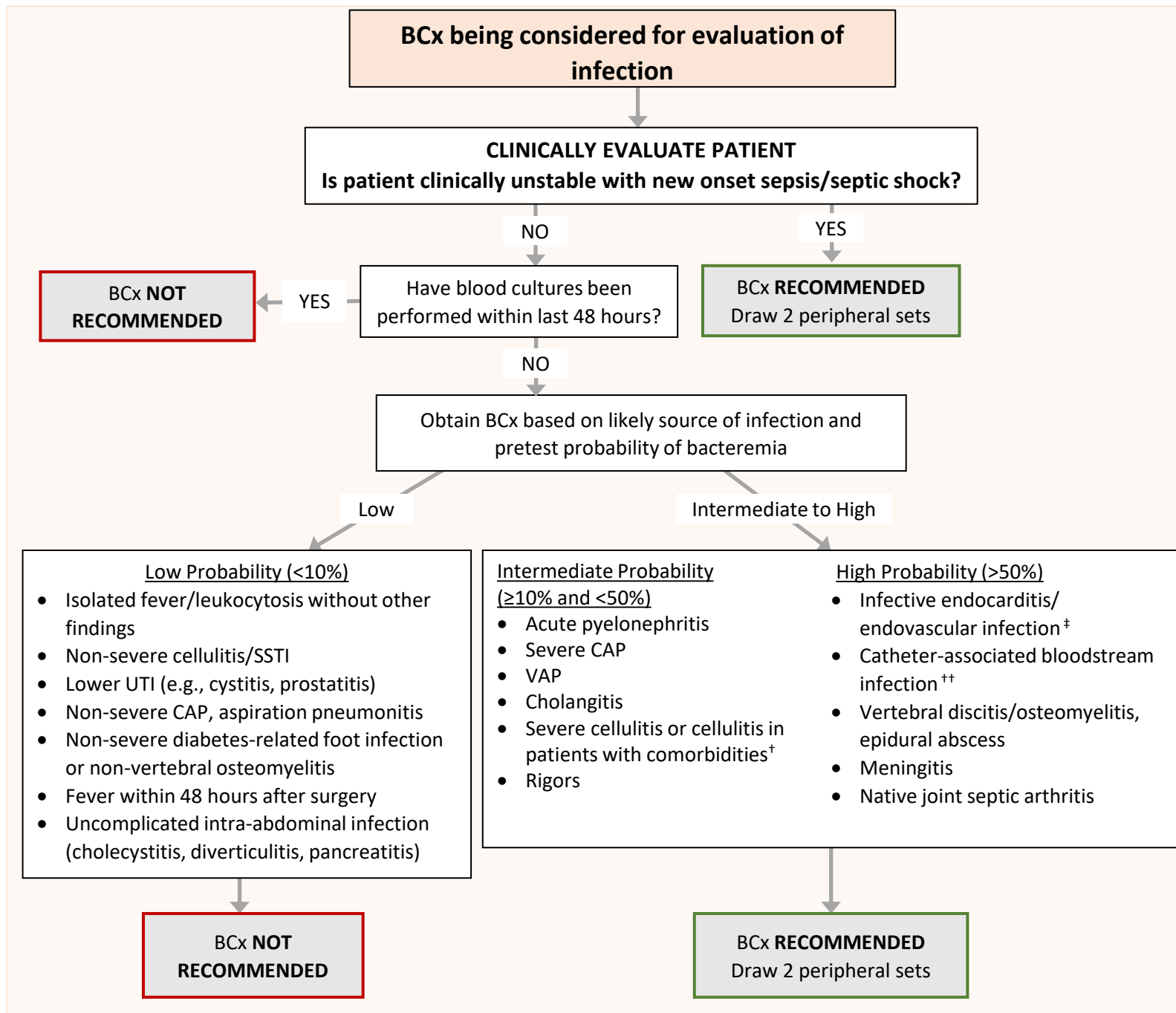


## INDICATIONS FOR INITIAL BLOOD CULTURES (BCx) in ADULTS\*



\*Excludes severely immunosuppressed patients (neutropenia, hematopoietic stem cell transplant, solid organ transplant)

## Figure Footnote

Algorithm of indications for blood cultures for non-severely immunocompromised patients. The algorithm is not a substitute for clinical judgment.

† Severe Cellulitis and Cellulitis in patients with comorbidities: ICU level of care, necrotizing soft tissue infection, severe immunocompromise, end-stage renal disease, end-stage liver disease

‡ Confirmed or suspected endovascular infection includes:

- Clinical evidence for endovascular infection such as septic thrombophlebitis, infected endovascular thrombi, implantable cardioverter defibrillator (ICD)/pacemaker lead infections, and vascular graft infections
- High-risk patient for endovascular infection including ICD/pacemaker, vascular graft, prosthetic valves and prosthetic material used for cardiac valve repair, history of infective endocarditis, valvulopathy in heart transplant recipient, unrepaired congenital heart disease, repaired congenital heart disease with residual shunt or valvular regurgitation, or within the first 6 months post-repair.

†† In setting of suspected central line infection, one blood culture should be obtained peripherally, then one culture should be obtained from the central line.

**Abbreviations:** BCx, blood culture; CAP, community-acquired pneumonia; SSTI: skin and soft tissue infection; UTI, urinary tract infection; VAP, ventilator-associated pneumonia.