



Parent Information for Babies Discharged on Oral Antibiotics

Your baby has been identified as being suitable to complete their course of antibiotics at home and be switched from intravenous antibiotics (antibiotics given through a cannula into the baby's veins) to oral antibiotics (antibiotics given by mouth). This is because they have an infection that needs a complete course of antibiotics, but they are well, and their blood tests show that the infection is not severe. It is very important that they are given the remaining doses once you are home so that their infection is adequately treated. The antibiotic they will be taking is amoxicillin.

Why am I being discharged on oral antibiotics?

We recognise that the best place for you and your family to bond with your new baby and establish breastfeeding, if that is your choice, is at home. It can also be difficult for parents to watch their baby have multiple cannulas inserted to complete a course of intravenous antibiotics. Recent studies in Denmark and the Netherlands, and more recent projects in other parts of the United Kingdom, have shown that switching babies from intravenous antibiotics to oral antibiotics is safe and effective, and did not lead to any more babies needing to come back to hospital because they were unwell. If you would like more information about these studies, please ask one of the team.

Can I choose to stay in hospital?

Yes. If you feel that you would be more comfortable staying in hospital or do not feel confident in giving the antibiotics by mouth, you can choose to stay in hospital, and your baby will continue on intravenous antibiotics.

What support will I get?

Our Neonatal Community Outreach Team (NCOT) will visit you at home 24-48 hours after discharge to check how you are getting on and to do a set of observations on your baby (this means checking their temperature, breathing rate, and heart rate and, oxygen levels). If you have any concerns, you can call NCOT on 07557 486990 between 0800-1800 Monday-Friday and 0900-1700 at weekends. Outside of these times, you can call the neonatal unit at your hospital on 01214243508 (Heartlands) or 01214249661 (Good Hope) and ask to speak to the neonatal registrar. NCOT will also call you on day 28 to gather data to ask if your baby has needed to be readmitted to hospital.

How to give your baby's antibiotics

Babies may take the antibiotic better if they are hungry, so you may find that giving them the antibiotic at the start of a feed works well.

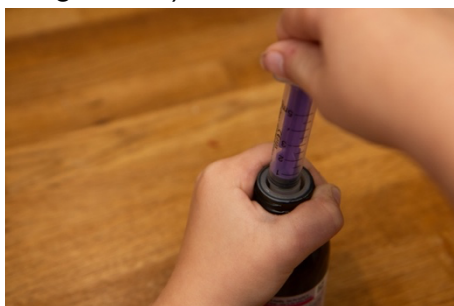
1. Store your baby's medicine in the fridge



2. Check the label to check it is the correct medicine then shake the bottle



3. Place the syringe inside the bottle and fill with the correct volume (this is written on the bottle and your baby's discharge letter)



4. Confirm you have the correct volume in the syringe



5. Place the syringe into your baby's mouth, between their gums and their cheeks. Gently squeeze the syringe to give the medicine in small amounts



6. Take the syringe apart and wash in warm, soapy water



7. Rinse well



8. Leave to air dry then put the syringe back together.



When should I seek help?

You do not need to worry if your baby has a small vomit around their dose of antibiotics, as this is normal. If your baby has a large vomit within 30 minutes of taking the medicine, you can safely repeat the full dose. If your baby has a large vomit with every dose, or you are unable to give your baby's antibiotics for another reason, please call the neonatal unit on 01214243508 (Heartlands) or 01214249661 (Good Hope) as your baby may need to be readmitted to restart intravenous antibiotics to ensure they complete their course.

If you are worried that your child appears unwell or are worried your baby has had an allergic reaction, please bring them to A&E immediately with a copy of their discharge letter from hospital. Signs that a baby is unwell include: being more sleepy than usual and not waking up for feeds, having difficulty breathing, abnormal colour, such as being very pale, or having a high or low temperature. Signs of an allergic reaction include: difficulty breathing, swelling around the lips or face, or a rash called urticaria or hives (this is red and white and has raised, bumpy areas). If you are unsure about a rash but your baby is otherwise well, your midwife, Health visitor, or GP could also advise you.

Resources:

St George's Hospital in London has produced a video explaining how to give antibiotics to babies, which is available here:



St Georges Hospital. May 2025. Switching from intravenous to oral antibiotics for clinically well babies on the postnatal ward. Version 2. Dr Hermione Leach, Dr Niamh Scally, Dr Donovan Duffy

References

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4. St Georges Hospital. May 2025. Switching from intravenous to oral antibiotics for clinically well babies on the postnatal ward. Version 2. Dr Hermione Leach, Dr Niamh Scally, Dr Donovan Duffy

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