

**8.1. RECOMMENDATION:**

**Should AUXILIARY NURSES deliver injectable antibiotics for neonatal sepsis, using a standard syringe?**

**Problem:** Poor access to treatment for neonatal sepsis  
**Option:** Auxiliary nurses delivering injectable antibiotics for neonatal sepsis  
**Comparison:** Care delivered by other cadres or no care  
**Setting:** Community/primary health care settings in LMICs with poor access to health professionals

Recommendation	<i>We recommend against the option</i>	<b><i>We suggest considering the option only in the context of rigorous research</i></b>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- We suggest considering this option only in the context of rigorous research. We suggest evaluating this intervention where auxiliary nurses are already an established cadre, where clear clinical guidelines are available and where a well-functioning referral system is in place or can be put in place.		
<b>Justification</b>	There is insufficient evidence on the effectiveness of auxiliary nurses delivering injectable antibiotics for neonatal sepsis using a standard syringe, and its feasibility is uncertain. However, this intervention may be acceptable and may reduce inequalities by extending care to underserved populations. Also, giving intramuscular and intravenous injections are generally within the standard competencies of auxiliary nurses.		
<b>Implementation considerations</b>	Not applicable		
<b>Monitoring and evaluation</b>			
<b>Research priorities</b>	Studies are needed to assess the effects of using auxiliary nurses to make a diagnosis and deliver injectable antibiotics for neonatal sepsis		