

University of California Davis Health
EMPIRIC ANTIBIOTIC GUIDELINES FOR ED PATIENTS: PEDIATRICS
(Less than or equal to 18 years of age)

Pre-approval of restricted antibiotics not required for initial “one time” dose in the ED **provided drug and indication are listed** in this table.

CONDITION	ADMIT OR DISCHARGE	CULTURE NEEDED?	1 ST CHOICE	ALTERNATIVES (intolerant to 1 st choice) Severe Penicillin Allergy: Concern for anaphylaxis
Cellulitis Mild	D/C	No	Cephalexin PO 15mg/kg/dose Q8H MAX of 500mg per dose	Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose
Moderate	A Consider Dalbavancin Pathway for patients ≥12 years of age as an alternative to hospitalization.	No	Cefazolin IV 50mg/kg/dose Q8H MAX 2,000mg/dose	Clindamycin IV 10mg/kg/dose Q8H MAX : 900mg/dose
			Cephalexin PO 15mg/kg/dose Q8H MAX of 500mg/dose	Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose
Severe or Necrotizing soft tissue infection	A Necrotizing Call ID + Surgery	Yes Blood	Clindamycin IV 10mg/kg/dose Q8H MAX : 900mg/dose and Vancomycin IV 15mg/kg/dose Q6H MAX : 1,000mg/dose	If penicillin allergic okay to give 1 st choice Rule out necrotizing process – emergency surgical debridement. Consult General Surgery
Abscess – Skin Mild: less than 5 cm Moderate: greater than 5 cm	D/C Consider Dalbavancin Pathway for patients ≥12 years of age as an alternative to hospitalization.	Yes Send syringe	Mild: consider I & D only	Mild: consider I & D only
			TMP-SMX 4-6 mg/kg PO Q12H MAX : 320mg of TMP/dose or Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose Treat for 5 – 7 days	TMP-SMX 4-6 mg/kg PO Q12H MAX : 320mg of TMP/dose or Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose Treat for 5 – 7 days
Severe	A	Yes Send syringe	Vancomycin IV 15mg/kg/dose Q6H MAX : 1,000mg/dose	Clindamycin IV 10mg/kg/dose Q8H (MAX: 900mg/dose)
Dog, Cat & Human Bites Prophylaxis of “high risk” bites	D/C	No	Amoxicillin/Clavulanate PO 12.5mg/kg/dose Q12H MAX : 875mg/dose Duration 3 – 5 days	TMP-SMX 4-6 mg/kg PO Q12H MAX : 320mg of TMP/dose and Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose
Low risk infections (discharge home)	D/C	Yes	Amoxicillin/Clavulanate PO 12.5mg/kg/dose Q12H MAX : 875mg/dose Treat 5 – 7 days	TMP-SMX 4-6 mg/kg PO Q12H MAX : 320mg of TMP/dose and Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose
High risk infections (admit)	A	Yes	Ampicillin/sulbactam 50mg/kg Q6H MAX : 3,000mg/dose	TMP/SMX 4-6 mg/kg PO/IV Q12H MAX : 320mg of TMP per dose and Clindamycin IV 10mg/kg/dose Q8H MAX : 900mg/dose Clindamycin PO 10mg/kg/dose Q8H MAX : 450mg/dose
Open fractures:	See <u>open fracture guideline</u>			
Pneumonia: CAP Send home (low risk)	D/C	No	Amoxicillin PO 30mg/kg/dose TID MAX : 875mg/dose If atypical suspected (greater than 5 years old) add Azithromycin PO 10mg/kg Day 1 MAX : 500mg/dose 5mg/kg QD Day 2-5 MAX : 250mg/dose	Doxycycline 1-2mg/kg/dose Q12H MAX : 200mg/day Not: only for patients greater than 8 years old Severe beta-lactam allergy: <u>Less than 5 years old</u> Levofloxacin PO 8-10mg/kg/dose Q12H MAX : 750mg/day <u>Greater than 5 years old</u> Levofloxacin PO 8-10mg/kg/dose QD MAX : 750mg/day

Admit CAP			<p>Age appropriate immunizations and healthy: Ampicillin 50 mg/kg/dose IV Q6H MAX: 1,000mg/dose</p> <p>Immunizations not age appropriate, co-morbidity, life threatening infection Ceftriaxone 50 mg/kg/dose IV QD MAX: 2,000mg/dose</p> <p>Empyema: add clindamycin Clindamycin IV 10mg/kg/dose Q8H (MAX: 900mg/dose)</p> <p>If atypical suspected (greater than 5 years of age) Add Azithromycin IV 10mg/kg Day 1 MAX: 500mg/dose 5mg/kg QD Day 2-5 MAX: 250mg/dose</p>	<p>Severe beta-lactam allergy: Less than 5 years old Levofloxacin PO/IV 8-10mg/kg/dose Q12H MAX: 750mg/day</p> <p>Greater than 5 years old Levofloxacin PO/IV 8-10mg/kg/dose QD MAX: 750mg/day</p>
Admit to floor HAP	See HAP guidelines			
ICU admission HAP	See HAP guidelines			
Sepsis (urosepsis, septic shock, etc.)	See Sepsis Guidelines			
Meningitis			<p>0 – 2 months Ampicillin IV 50-100mg/kg Q6H MAX: 1,000mg/dose + Cefotaxime IV 50-75mg/kg/dose Q6H MAX: 2,000mg/dose</p> <p>if less than 1 month of age add Acyclovir IV 20mg/kg/dose Q8H</p> <p>2 months – 18 years of age Ceftriaxone IV 50mg/kg Q12H MAX: 2,000mg/dose + Vancomycin IV 15-20mg/kg Q6H MAX: 1,000mg/dose</p> <p>Greater than 2 months old: Consider addition of corticosteroids if CSF suggestive of bacterial meningitis (give before or concurrently with 1st dose of antibiotics). Dexamethasone 0.15mg/kg/dose Q6H x2 days</p>	<p>Call Peds ID Attending</p>
Cystitis (uncomplicated)	D/C	Yes: Urine	<p>Cephalexin PO 12.5 to 25mg/kg/dose Q8H MAX: 500mg/dose</p>	<p>Nitrofurantoin PO suspension 1.25-1.75mg/kg/dose Q6H MAX: 100mg/dose</p> <p>OR</p> <p>Nitrofurantoin PO tablet 100mg Q12H (for patients greater than 15kg and able to swallow tablets)</p>
Pyelonephritis Uncomplicated (send home)	D/C	Yes: Urine	<p>Cefixime PO 4mg/kg/dose Q12H MAX: 200mg/dose</p> <p>(available as suspension & 100mg chewable tablet)</p>	<p>Less than 5 years old Levofloxacin PO 8-10mg/kg/dose Q12H MAX: 750mg/day</p> <p>Greater than 5 years old Levofloxacin PO 8-10mg/kg/dose QD MAX: 750mg/day</p> <p>Treat 7 – 10 days</p>
Complicated cystitis/pyelonephritis Admit to floor	A	Yes: Urine	<p>Ceftriaxone IV 50mg/kg Q24H MAX: 1,000mg/dose and Consider adding gentamicin IV 5 mg/kg QD (if multiple recurrent infections call Peds ID)</p>	<p>Less than 5 years old Levofloxacin PO 8-10mg/kg/dose Q12H MAX: 750mg/day</p> <p>Greater than 5 years old Levofloxacin PO 8-10mg/kg/dose QD MAX: 750mg/day</p> <p>Treat 7 – 10 days</p>
Appendicitis	See Appendicitis guidelines			
Sinusitis >10 days symptoms OR fever with purulent discharge >3 days	D/C	No	<p>Amoxicillin/clavulanic 45mg/kg/dose Q12hH MAX: 875mg/dose</p> <p>Treat 5 – 10 days</p>	<p>Greater than 8 years old Doxycycline 2mg/kg/dose Q12H MAX: 100mg/dose</p> <p>OR</p> <p>Less than 5 years old Levofloxacin PO 8-10mg/kg/dose Q12H MAX: 750mg/day</p> <p>Greater than 5 years old Levofloxacin PO 8-10mg/kg/dose QD MAX: 750mg/day</p>

Otitis Media	D/C	No	High dose amoxicillin PO 45mg/kg/dose Q12H MAX: 1,000mg/dose <i>OR</i> If recent failure, consider: Amoxicillin/clavulanate PO 12.5mg/kg/dose Q12H MAX: 875mg/dose If less than 2 years old treat for 10 days Greater than 2 years old treat 5 – 7 days	Less than 5 years old Levofloxacin PO 8-10mg/kg/dose Q12H MAX: 750mg/day Greater than 5 years old Levofloxacin PO 8-10mg/kg/dose QD MAX: 750mg/day
Septic Joint	A Call Peds ID + Ortho	Yes	Cefazolin IV 50mg/kg/dose Q8H MAX 2,000mg/dose <i>and</i> Vancomycin IV 15mg/kg/dose Q6H MAX: 1,000mg/dose If sexually active, consider: <i>Chlamydia/N. gonorrhoeae</i> . Substitute ceftriaxone for cefazolin. Ceftriaxone IV 50mg/kg Q24H MAX: 2,000mg/dose	Call Peds ID
Osteomyelitis	A Call Peds ID + Ortho	Yes	Please collect cultures prior to starting antibiotic therapy	

Please write diagnosis (condition) in order sent to pharmacy.
The above table provides guidelines and does not impose rigid restrictions.
The clinical presentation of individual patients may require use of different antibiotics.

Approved by UCDH Pharmacy & Therapeutics Committee 12/2017.