UC DAVIS MEDICAL CENTER PEDIATRIC PARENTERAL ANTIBIOTIC INPATIENT FORMULARY

Antibiotic Restrictions/Comments

<u>Aminoglycosides</u>

Amikacin I.D. authorization required Gentamicin Aminoglycoside of choice

Tobramycin Confirmed or suspected pseudomonal infection

<u>Penicillins</u>

Ampicillin No restrictions
Nafcillin No restrictions
Penicillin G No restrictions

Ampicillin/sulbactam High risk animal/human bite, ENT or I.D. authorization required

Piperacillin/tazobactam I.D. authorization required

Cephalosporins

Cefazolin No restrictions

Ceftriaxone Not for use in infants less than 1month

Ceftazidime Confirmed or suspected pseudomonal infection, febrile neutropenia, or I.D.

authorization. Empiric treatment for infants less than 1 month

Cefepime Empiric treatment of nosocomial infection in PICU patients, febrile neutropenia,

cystic fibrosis, or I.D. authorization

Other Beta-lactams

Aztreonam I.D. authorization required

Ertapenem I.D. authorization required, one pre-op dose for colorectal surgery approved

Meropenem I.D. authorization required

Miscellaneous

Acyclovir No restrictions

Azithromycin Community-acquired PNA (CAP) with concern for atypical pathogens in children

Greater than or equal to 5 years old, CAP in sickle cell patients of any age, or

I.D. authorization

Levofloxacin I.D. authorization required

Clindamycin No restrictions

Daptomycin I.D. authorization required

Doxycycline Children Greater than >8 years of age

Erythromycin No restrictions

Ganciclovir CMV retinitis or I.D. authorization

Linezolid I.D. authorization required

Metronidazole No restrictions
Rifampin No restrictions

TMP/SMX Not for use in infants less than 2 months unless no alternative available. Extreme

caution in neonates.

Vancomycin No restrictions

Antifungals

Amphotericin B No restrictions

Ambisome Persistent neutropenic fever or I.D. authorization

Fluconazole I.D. authorization required Micafungin I.D. authorization required

Voriconazole Prophylaxis during AML induction or I.D. authorization

Posaconazole (oral) I.D. authorization required

All other parenteral antibiotics are non-formulary and require Pediatric Stewardship Attending approval. Drug dosing information can be obtained by paging the pediatric pharmacist on 762-7816.

Updated by The Antibiotic Subcommittee October 2023. P&T approved March 2024.