

<b>LSUHSC-S ANTIBIOTIC GUIDELINES</b>		
<b>OSTEOMYELITIS</b>	<b>INITIAL REGIMENS OF CHOICE</b>	<b>SERIOUS PENICILLIN ALLERGY</b>
<b>I. Hematogenous – Organism Unknown</b>		
A. Newborns ( $\leq 3$ months of age)	Nafcillin 38 mg/kg IV q6h (substitute Vancomycin 10 mg/kg IV q6h if MRSA suspected) and Cefotaxime 75 mg/kg IV q8h, and Pediatric Infectious Diseases Consult	Clindamycin 10 mg/kg IV q8h (substitute Vancomycin 10 mg/kg IV q6h if MRSA suspected) and Cefotaxime 75 mg/kg IV q8h, and Pediatric Infectious Diseases Consult
B. Children ( $>3$ months – 12 years)	Nafcillin 38 mg/kg (maximum 2 gms) IV q6h or Cefazolin 33 mg/kg (maximum 2 gms) IV q8h (substitute Vancomycin 10 mg/kg [maximum 1 gm] IV q6h if MRSA suspected), and Pediatric Infectious Diseases Consult	Clindamycin 10 mg/kg (maximum 900 mg) IV q8h (substitute Vancomycin 10 mg/kg [maximum 1 gm] IV q6h if MRSA suspected), and Pediatric Infectious Diseases Consult
C. Adults and Children $>12$ Years	Nafcillin 2 gms IV q4h, or Cefazolin 1 gm (use 2 gms if obese) IV q8h, or Vancomycin 1 gm IV q12h if MRSA suspected	Clindamycin 900 mg IV q8h, or Vancomycin 1 gm IV q12h if MRSA suspected
<b>II. Hematogenous – Organism Known</b>		
A. Newborns ( $\leq 3$ months of age)		
1. MSSA	Nafcillin 38 mg/kg IV q6h, and Pediatric Infectious Diseases Consult	Clindamycin 10 mg/kg IV q8h, and Pediatric Infectious Diseases Consult

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2. MRSA	Vancomycin 10 mg/kg IV q6h, and Pediatric Infectious Diseases Consult	Vancomycin 10 mg/kg IV q6h, and Pediatric Infectious Diseases Consult
3. Gram-Negative Bacilli, Mixed, or Other	Consult Pediatric Infectious Diseases	Consult Pediatric Infectious Diseases
B. Children (>3 months – 12 years)		
1. MSSA	Nafcillin 38 mg/kg (maximum 2 gms) IV q6h or Cefazolin 33 mg/kg (maximum 2 gms) IV q8h and Pediatric Infectious Diseases Consult	Clindamycin 10 mg/kg (maximum 900 mg) IV q8h and Pediatric Infectious Diseases Consult
2. MRSA	Vancomycin 10 mg/kg [maximum 1 gm] IV q6h, and Pediatric Infectious Diseases Consult	Vancomycin 10 mg/kg [maximum 1 gm] IV q6h, and Pediatric Infectious Diseases Consult
3. Gram-Negative Bacilli, Mixed, or Other	Consult Pediatric Infectious Diseases	Consult Pediatric Infectious Diseases
C. Adults and Children >12 Years		
1. MSSA	Nafcillin 2 gms IV q4h, or Cefazolin 1 gm (use 2 gms if obese) IV q8h	Clindamycin 900 mg IV q8h
2. MRSA	Vancomycin 1 gm IV q12h	Vancomycin 1 gm IV q12h
3. Gram-Negative Bacilli, Mixed, or Other	Consult Infectious Diseases	Consult Infectious Diseases

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III. Special Clinical Considerations		
A. Sickle Cell Anemia		
1. Pediatric (<18 years)	Consult Pediatric Infectious Diseases	Consult Pediatric Infectious Diseases
2. Adults	Nafcillin 2 gms IV q4h and Ciprofloxacin 400 mg IV or 750 mg po bid or Ceftriaxone 1 gm IV qd	Clindamycin 900 mg IV q8h and Ciprofloxacin 400 mg IV or 750 mg po bid
B. Hemodialysis	Nafcillin 2 gms IV q4h or Vancomycin 1 gm IV initially with repeat dosing based on blood levels and Ciprofloxacin 200 mg IV q12h	Vancomycin 1 gm IV initially with repeat dosing based on blood levels and Gentamicin 1.7 mg/kg IV initially with repeat dosing based on blood levels
C. IV Drug Use	Nafcillin 2 gms IV q4h or Vancomycin 1 gm IV q12h and Gentamicin once-daily dosing	Vancomycin 1 gm IV q12h and Gentamicin once-daily dosing
IV. Contiguous With Vascular Insufficiency		
A. Pediatric (<18 years)	Consult Pediatric Infectious Diseases	Consult Pediatric Infectious Diseases
B. Adults	Imipenem 0.5 gms IV q6h or Piperacillin/tazobactam 3.375 gms IV q6h	Clindamycin 900 mg IV q8h and Ciprofloxacin 400 mg IV q12h or 750 mg PO bid
V. Chronic (all ages)	Choose therapy based on results of bone biopsy cultures and smears	Choose therapy based on results of bone biopsy cultures and smears

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