

**Inland Empire Health Plan  
Adult Anti-Infective Therapy Guide**

<b>Infection</b>	<b>Pathogens*</b> †	<b>1<sup>st</sup> Line</b>	<b>2<sup>nd</sup> Line</b>	<b>3<sup>rd</sup> Line</b>	<b>4<sup>th</sup> line</b>
Skin/Cellulitis	Staph. a., StrepA	Dicloxacillin 500mg po QID  Suspected MRSA infection: TMP/SMX DS BID X 14 days  Treatment should be decided according to the susceptibility test.	Cephalexin 250- 500mg QID <b>Or</b> Erythromycin 500mg QID  Suspected MRSA infection: Clindamycin 300mg QID X 14 days  Treatment should be decided according to the susceptibility test.	Amoxil/Clav. acid 500-875mg BID to TID	Azithromycin 500mg X 1 day, then 250mg QD X 4 days
Skin-Diabetic	Staph. a., StrepA, GNR, Anaer.	Clindamycin 300mg QID X 14 days <b>Or</b> Cephalexin 500mg QID X 14 days	Amoxil/Clav. acid 500-875mg BID to TID	For non-limb/life- threatening, chronic, recurrent: levofloxacin 750mg QD + Clindamycin 300mg QID	
Skin-Bite wound	Staph. a., StrepA, Past. mult., Anaer.	Amoxil/Clav. acid 500-875mg BID to TID	Cefuroxime 500mg Q12h <b>Or</b> Doxycycline 100mg BID	TMP/SMX DS BID + Clindamycin 300mg QID	*Ciprofloxacin 500-750mg BID + Clindamycin 300mg QID
Pharyngitis	StrepA	Pen VK 250-500mg QID/BID x 10 days	Erythromycin 250-500mg QID x 10 days	Cephalexin 250-500mg TID or Cefaclor 250- 500 TID <b>Or</b> Clindamycin 300mg QID	Clarithromycin 500mg BID X 10days <b>Or</b> Azithromycin 500mg X 1 day, then 250mg X 4 days
Rhinosinusitis- Acute	Strep. pneum., H. flu	Reserve antibiotics for patients given decongestants/ analgesics for 7 days who have <b>1)</b> maxillary /facial pain & <b>2)</b> purulent, nasal	For mild/ moderate disease, no antibiotics taken in the prior month and/or DRSP** prevalence <30%: Amoxicillin 1g TID <b>Or</b>	For mild/ moderate disease, antibiotics taken in the prior month and/or DRSP** prevalence >30%: Amoxil/Clav. acid 500-875mg BID to TID	

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		discharge; if severe illness (pain, fever), treat sooner	Amoxil/Clav. acid 500-875mg BID to TID	<b>Or</b> Levofloxacin 500mg QD	
Sinusitis-Chronic	Strep. pneum., Staph. a., H. flu., Anaer.	No abx, treat symptoms	Antibiotics usually not effective otolaryngology consultation is recommended. For acute exacerbations, Rx as acute.		
Bronchitis-Acute	Viral, Myco. pneum., H. flu	No abx; Treat symptoms.	If pneumonia is present, start antibiotics. (See Pneumonia – Community)		
Bronchitis-Chronic	Viral, Myco. pneum., Strep. pneum., H. flu, Chlam. pneum., Mor. cat.	For mild/moderate disease, no antibiotics needed	For severe disease (accompanied with increased dyspnea, increased sputum purulence, febrile), Amoxil/Clav. acid 500-875mg BID to TID <b>Or</b> Azithromycin 500mg X 1 day, then 250mg QD X 4 days		
Pneumonia-Community	Viral, Strep. pneum.(5-55%), H. flu(9%), Staph.a.(2%), GNR	Previously healthy with no recent antibiotic: Azithromycin 500mg X 1 day, then 250mg QD X 4 days <b>Or</b> Doxycycline 100mg BID  * comorbidities include alcohol, smoker, COPD.	Presence of Comorbidities, use of antimicrobial within the previous 3months, or other risks for DRSP infection:  Levofloxacin 750mg QD <b>Or</b> Azithromycin 500mg x 1d; then 250mg x 4d <b>Or</b> Clarithromycin 500mg BID + Amoxicillin 1g		

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			TID <b>Or</b> Amoxil/Clauv. acid XR 1000/62.5mg 2 tabs BID <b>Or</b> Cefdinir 300mg BID <b>Or</b> Cefpodoxime 200mg BID <b>Or</b> Cefuroxime 500mg BID		
Pneumonia- Atypical	Myc. pneum., LegChlam. pneum.	Clarithromycin 500mg BID <b>Or</b> Azithromycin 500mg X 1 day, then 250mg QD X 4 days	Doxycycline 100mg BID <b>Or</b> Telithromycin 400mg 2 tabs QD		
UTI	GNR, Ent.	If TMP-SMX resistant E.coli are not prevalent: Cephalexin 500mg QID x 7 days <b>Or</b> Nitrofurantoin 100mg BID x 5 days <b>Or</b> TMP-SMX DS BID X 3 days	If TMP-SMX resistant E.coli prevalent:  Ciprofloxacin 250mg BID X 3 days <b>Or</b> Cefixime 400mg QD x 3 days <b>Or</b> Nitrofurantoin 100mg BID x 5 days <b>Or</b> Doxycycline 100mg BID x 3 days		
Pyelonephritis or Non-STD Prostatitis	GNR	Ofloxacin 400mg BID X 7 days <b>Or</b> Ciprofloxacin 500mg BID X 7 days	TMP-SMX DS BID X 14 days		
Diarrhea-	Campy.,	Ciprofloxacin	TMP-SMX DS	If recent antibiotic:	

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Inflammatory	Shig., Salm., E.coli	500mg BID Or Levofloxacin 500mg QD X 3- 5 days	BID X 3-5 days	Metronidazole 500mg TID X 10- 14days	
Cervical or Urethral Gonorrhea	N. gonorrhea	Ceftriaxone 125mg IM X 1 + If C. trach not ruled out: (Doxycycline 100mg BID X 7 days Or Azithromycin 2gm X 1)	Cefixime 400mg x 1 + If C. trach not ruled out: (Doxycycline 100mg BID X 7 days <b>Or</b> Azithromycin 2gm X 1)	Doxycycline 100mg BID X 7 days	
Cervical or Urethral Chlamydia	Chlam. trach.	Doxycycline 100mg BID X 7 days  (Treat male sexual partners)	Azithromycin 1000mg X 1	Erythromycin 500mg QID X 7 days <b>Or</b> Ofloxacin 300mg BID X 7 days	
Vaginal Trichomoniasis	Trich. vag.	Metronidazole 2g X 1 (Treat male sexual partners)	Tinidazole 2g po single dose	Metronidazole 500mg BID X 7 days	
Bacterial Vaginosis	Gard. vag., Anaer.	Metronidazole 500mg po BID X 7 days	Metronidazole vaginal gel QD X 5 days	Clindamycin 300mg BID X 7 days <b>Or</b> Clindamycin 2% vaginal cream HS X 7 days	
Vaginal Candidiasis	Cand. alb., Cand. gl.	Fluconazole 150mg X 1 <b>Or</b> Itraconazole 200mg BID X 1	Miconazole 2% vag cream QHS X 7 days <b>Or</b> Miconazole-3 vag supp QHS X 3 days	Butoconazole vag cream QHS X 3 days	Terconazole-3 vag cream QHS X 3 days
PID-(Outpatient)	Anaer., Chlam. trach., N. gonorrhea	Ceftriaxone 250mg IM X 1 + Doxycycline 100mg BID X 14 days ± Metronidazole 500mg BID x 14 days	Cefoxitin 2g IM + Probenecid 1g po + Doxycycline 100mg BID X 14 days ± Metronidazole 500mg BID x 14 days		
Genital Herpes- Primary	Herpes simp.	Acyclovir 400mg TID or 200mg 5X/day X 7-10 days	Valacyclovir 1000mg BID X 7 days	Famciclovir 250mg TID x 7-10 days	

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Genital Herpes- Recurrent	Herpes simp.	Acyclovir 400mg TID X 5 days <b>or</b> 800mg TID x 2 days	Famciclovir 1000mg BID X 1 day <b>Or</b> Valacyclovir 500mg BID X 3 days		
Herpes Zoster	Herpes zos.	Acyclovir 800mg 5x/day X 7-10 days	Valacyclovir 1g TID X 7 days	Famciclovir 500mg TID X 7 days	

\* Anaer.=Anaerobes, Cand. alb.=Candida albicans, Campy.=Campylobacter sp., Cand. gl.=Candida glabrata, Chlam. pneum.=Chlamydia pneumoniae, Chlam. trach.=Chlamydia trachomatis, Ent.=Enterococcus sp., GNR=Gram-negative rods, Gard. vag.=Gardnerella vaginalis, H. flu=Hemophilus inf., Herpes simp.=Herpes simplex, Herpes zos.=Herpes zoster, Leg=Legionella sp., Mor. cat.=Moraxella catarrhalis, Myco. pneum.=Mycoplasma pneumoniae, N. gonorrhoea=Neisseria gonorrhoea, Past. mult.=Pasteurella multocida, Strep. pneum.=Strep. Pneumoniae, Staph. a. =Staph. aureus, Salm.=Salmonella sp., Shig.=Shigella sp., StrepA=Group A Strep., Trich. vag.=Trichomonas vaginalis

\*\* DRSP = Drug Resistant Streptococcus pneumoniae

† Viruses included