

Uncomplicated UTI in Children 2 years & Older: No Fever, No Flank Pain, Non-toxic			
<i>Before beginning any antibiotics, obtain UA & urine culture. If previous UTI, base empiric therapy on prior culture.</i>			
Line	Antibiotic	Dosage	Additional notes
Duration: Non-adolescent 5-7 days, Adolescent 3-5 days (exception: Nitrofurantoin, see below)			
1	Cephalexin	50 mg/kg/day PO divided TID Max 500 mg/dose	
2	Cefixime	8 mg/kg/day PO q day or divided BID Max 400mg/day	
2	Cefpodoxime	10 mg/kg/day PO divided BID Max 100 mg/dose for UTI	
2	Amoxicillin/ Clavulanate	40 mg/kg/day PO divided TID Max 500 mg Amoxicillin component/dose	Use 600 mg/5mL ES concentration for less diarrhea. TID dosing is for increased renal bioavailability.
Severe Penicillin or Cephalosporin Allergy			
3	TMP/SMX	6-12 mg/kg/day PO divided BID Max 160 mg TMP/dose	Approximately 25% of E. coli isolates in this area have resistance to TMP/SMX - use with caution.
3	Nitrofurantoin - Macrochantin®	5-7 mg/kg/day PO divided q6h Max 100 mg/dose (duration 5- 7 days)	
3	Nitrofurantoin - Macrocrystal/ monohydrate (Macrobid®)	100 mg PO BID (duration 5-7 days)	For adolescents only
NOTE: DO NOT USE CEFDINIR FOR UTI/PYELO - POOR URINARY CONCENTRATION			

Pyelonephritis, Febrile UTI in Children > 2 Months of Age			
<i>Before beginning any antibiotics, obtain UA & urine culture. If previous UTI, base empiric antibiotics on prior culture.</i>			
Line	Antibiotic	Dosage	Additional notes
Duration: 7-14 days (7 days is typically adequate treatment)			
1	Cephalexin	75 mg/kg/day PO divided TID Max 500 mg/dose	
2	Cefixime	8 mg/kg/day PO daily or divided BID Max 400 mg/day	
2	Cefpodoxime	10 mg/kg/day PO divided BID Max 200 mg/dose for pyelo	
2	Amoxicillin/ Clavulanate	40 mg/kg/day PO divided TID Max 500 mg amoxicillin component/dose	TID dosing is for better renal bioavailability.

Severe Penicillin Allergy	TMP/SMX	6-12 mg/kg/day PO divided BID Max 160mg TMP/dose	Approximately 25% of E. coli isolates in this area have resistance to TMP/SMX - use with caution.
	Ciprofloxacin	20 mg/kg/day PO divided BID Max 750 mg/dose	
NOTE: DO NOT USE CEFDINIR FOR UTI/PYELO - POOR URINARY CONCENTRATION			

Uncomplicated Community- Acquired Pneumonia (CAP)			
Consider sending Respiratory Filmarray			
Duration: 5-7 days			
Line	Antibiotic	Dosage	Additional Notes
1	Amoxicillin	90 mg/kg/day PO divided BID Max 875 mg/dose	
Mild to Moderate Penicillin Allergy			
2	Cefuroxime	30 mg/kg/day PO divided BID Max 500 mg/dose	Only available in tablets
2	Cefpodoxime	10 mg/kg/day PO divided BID Max 200 mg/dose	Often not on outpatient formulary, \$\$\$\$ Cefdinir should not be used. Less effective against Pneumococcus.
2	Cefprozil	15-30mg/kg/day PO divided BID Max 500 mg/dose	Often not on outpatient formulary, \$\$\$\$ Cefdinir should not be used. Less effective against Pneumococcus.
Severe Penicillin/ Cephalosporin Allergy			
	Clindamycin	30 mg/kg/day PO divided TID Max 600 mg/dose	
	Levofloxacin	20 mg/kg/day PO divided BID for 6 mos.- 5 yrs.; 10mg/kg/day once daily for >5yrs Max 750 mg/day	

Atypical Pneumonia- adolescents with bilateral findings on CXR, consistent Hx/PE			
Duration: 5 days			
Line	Antibiotic	Dosage	Additional Notes
1	Azithromycin	10 mg/kg PO daily on day 1 (max 500 mg/dose), then 5mg/kg/dose PO daily Days 2-5 (max 250 mg/dose)	Approximate 50% of pneumococcus in this area is resistant to Azithromycin. Not recommended for focal CXR findings.

Unimmunized or Underimmunized Children			
Duration: 5-7 days			
Line	Antibiotic	Dosage	Additional Notes
1	Amoxicillin/Clavulanate	90 mg/kg/day divided BID Max 875 mg/dose	Use ES 600mg/5mL concentration to decreased side effect of diarrhea. Amox/Clav has better coverage for H. influenzae compared with Amoxicillin alone.

Skin and Soft Tissue Infections

Impetigo

Mild Cases with Only a Few Lesions

Duration: 5 Days

Line	Antibiotic	Dosage	Additional Notes
1	Topical Mupirocin	Apply TID	

Numerous lesions or perioral lesions

Duration: 5-7 Days

1	Cephalexin	50 mg/kg/day PO divided TID Max 250 mg/dose	
2	Amoxicillin/ Clavulanate	25 mg/kg/day PO divided BID (Amox component) Max 875mg/dose	

If suspected/confirmed MRSA (Child with a personal history or household contact)
AND/OR Severe Penicillin/ Cephalosporin Allergy

	Clindamycin	30 mg/kg/day PO divided TID Max 450 mg/dose	
	TMP-SMX	8-12 mg/kg/day PO divided BID (TMP component) Max 160 mg/dose	May not cover Group A Strep.

Cellulitis

Duration: 5-7 Days

Line	Antibiotic	Dosage	Additional Notes
1	Cephalexin	50 mg/kg/day PO divided TID Max 500 mg/dose	

If suspected/confirmed MRSA (child with a personal history or household contact)
AND/OR Severe Penicillin/ Cephalosporin Allergy

	Clindamycin	30 mg/kg/day PO divided TID Max 450 mg/dose	
	TMP-SMX	8-12 mg/kg/day PO divided BID (TMP component) Max 160 mg/dose	May not cover Group A Strep.

Abscess

I & D with stab or crisscross incision; attempt to place loop drain if able. No packing. **SEND CULTURE.**

Duration: 5-7 Days

Line	Antibiotic	Dosage	Additional Notes
1	Clindamycin	30 mg/kg/day PO divided TID Max 450 mg/dose	Resistance to Clindamycin in this area is low. ~88% of CA-MRSA isolates are susceptible.
1	TMP-SMX	8-12 mg/kg/dose PO divided BID (TMP component) Max 160 mg/dose	May not cover Group A Strep, less likely to be a pathogen with abscess.



Pyelonephritis, Febrile UTI in children > 2 months

Before beginning any antibiotics, obtain UA & urine culture. If previous UTI, base empiric therapy on prior culture.

Line	Antibiotic	Dosage	Additional notes
Duration: 7-14 days (7 days is typically adequate)			
1	Ceftriaxone	50 mg/kg/day IV Max 1 gram/day	
1	Cefazolin	75 mg/kg/day IV divided q 8 hours Max 2 g/dose	
<i>Cephalosporin Allergy</i>			
2	Ciprofloxacin	18-30 mg/kg/day IV divided q 8 hours Max 400 mg/dose	

Uncomplicated Community - Acquired Pneumonia (CAP) > 3 months: Not Mycoplasma/Chlamydia/S. Aureus			
Duration: 5-7 days			
Line	Antibiotic	Dosage	Additional Notes
1	Ampicillin	200 mg/kg/day IV divided q 6 hours Max 2,000 mg/dose	IV Ampicillin is considered a step-up in therapy from oral Amoxicillin
<i>Mild to Moderate Penicillin Allergy:</i>			
2	Ceftriaxone	75 mg/kg IV daily Max 2 grams/day	
<i>Severe Penicillin (Anaphylaxis)/ Cephalosporin Allergy</i>			
	Clindamycin	40 mg/kg/day IV divided q 8 hours Max 600 mg/dose	
Complicated CAP: Large pleural effusion, empyema, or lung abscess			
Consider ID Consult			
For large effusions, consider IR or surgery consult - chest tube with tPA often first line			
Duration: Depends on intervention/complications			
Line	Antibiotic	Dosage	Additional Notes
1	Ampicillin/Sulbactam	200 mg/kg/day of Ampicillin component divided q 6 hours Max 2 g ampicillin component/dose	
1	Ceftriaxone PLUS Clindamycin	75 mg/kg/day Max 2 g/day PLUS 40 mg/kg/day divided q8 hours Max 600 mg/dose	Combination therapy is required for severe CAP. Ceftriaxone PLUS Clindamycin with dosages split respectively. Addition of Clindamycin is for suspected S. aureus or anaerobic coverage.



Skin and Soft Tissue Infections			
<i>Cellulitis</i>			
Duration: 5-7 Days			
1	Cefazolin	50 mg/kg/day IV divided q 8 hours Max 1 g/dose	
If suspected/confirmed MRSA (child with a personal history or household contact) Severe Penicillin/ Cephalosporin Allergy			AND/OR
	Clindamycin	30 mg/kg/day IV divided TID Max 450 mg/dose	
	TMP-SMX	8-12 mg/kg/day PO or IV divided BID Max 160 mg/dose TMP component	May not cover Group A Strep. PO is preferred if possible due to volume required for IV.
<i>Abscess</i>			
Duration: 5-7 Days			
I&D with stab or crisscross incision; attempt to place loop drain if able. No packing. SEND CULTURE.			
Line	Antibiotic	Dosage	Additional Notes
1	Clindamycin	30 mg/kg/day IV divided TID Max 450 mg/dose	Resistance to Clindamycin in this area is low. ~88% of CA-MRSA isolates are susceptible.
1	TMP-SMX	8-12 mg/kg/day PO or IV divided BID Max 160 mg TMP/dose)	May not cover Group A Strep; less likely pathogen with abscesses. PO preferred if able due to volume required for IV.
If not responding to above, consult Infectious Diseases and below treatment.			
Line	Antibiotic	Dosage	Additional Notes
	Linezolid	30mg/kg/day IV divided TID Max 600mg/dose (7 days-11yrs) 1200 mg/day IV divided BID (12yrs and up)	