

## RECOMMENDED INITIAL ANTIBIOTICS FOR ADULT SEPTIC PATIENTS

These antibiotics are intended to be administered as the initial doses only (i.e., <24 hours) and should be re-evaluated as clinical and laboratory information becomes available. **Cultures should ideally be obtained PRIOR to initiation of antibiotics.**

Clinical Situation/Source	Adult Sepsis Patient	
	Antibiotics	Alternative (for severe allergies)
Unknown	Piperacillin-Tazobactam OR Cefepime plus Vancomycin	Piperacillin-Tazobactam OR Cefepime to Aztreonam Vancomycin to Daptomycin
Meningitis	Cefepime plus Vancomycin	Cefepime to Aztreonam Vancomycin to Linezolid
Skin and Soft Tissue	Piperacillin-Tazobactam OR [Cefepime plus Metronidazole] plus Vancomycin	Piperacillin-Tazobactam OR [Cefepime plus Metronidazole] to [Aztreonam plus Metronidazole] Vancomycin to Daptomycin
Pneumonia	CAP: Piperacillin-Tazobactam OR Cefepime plus Levofloxacin HAP/HCAP: Piperacillin-Tazobactam OR Cefepime plus Levofloxacin plus Vancomycin	Piperacillin-Tazobactam OR Cefepime to Aztreonam Levofloxacin to Azithromycin Vancomycin to Linezolid
Intra-abdominal	Piperacillin-Tazobactam OR [Cefepime plus Metronidazole]	Piperacillin-Tazobactam OR [Cefepime plus Metronidazole] to Aztreonam plus Metronidazole plus Vancomycin
Urinary Tract	Piperacillin-Tazobactam [OR Cefepime] plus Vancomycin	Piperacillin-Tazobactam [OR Cefepime] to Aztreonam Vancomycin to Linezolid
Immunocompromised <ul style="list-style-type: none"> <li>• Neutropenia</li> <li>• Solid organ transplant</li> <li>• Hematopoietic stem cell transplant</li> </ul>	Meropenem plus Vancomycin	Meropenem to Aztreonam plus Metronidazole Vancomycin to Daptomycin

CAP, community acquired pneumonia; HAP, hospital acquired pneumonia; HCAP, healthcare-associated pneumonia

### Dosing Table for Patients with Normal Renal Function:

Drug	Dose
Aztreonam	2g IV q 8 h
Cefepime	2g IV q 8 h
Daptomycin	6 mg/kg q 24 h
Levofloxacin	750 mg IV q 24 h
Linezolid	600 mg IV q 12 h
Metronidazole	500 mg IV q 8 h
Meropenem	500 mg IV q 6 h (unknown source); 2g IV q 8 h (meningitis)
Piperacillin/tazobactam	4.5 g IV q 6 h
Vancomycin	20mg/kg IV q 12 h; use multiples of 1g premixes for first dose, follow with pharmacy consult

**Consult pharmacist for any dosing questions; first doses should match doses recommended for normal renal function.**

**Order of Administration:** Infuse beta-lactam first (can be given over 15-30 min); followed by vancomycin, daptomycin, or linezolid; metronidazole, tobramycin, or levofloxacin should be the last drug administered.