

ANMC Adult Orthopedic Surgery Antibiotic Guide

Diagnosis	Preferred Antibiotic	Duration
IVDU-Associated Abscess	Vancomycin IV <u>If septic or tendon involvement:</u> -Add Ampicillin/sulbactam 3g IV Q6H	5 days
Fight Bite	<u>Preferred therapy:</u> - Ampicillin/sulbactam 3g IV Q6H - Amoxicillin/clavulanate 875mg PO Q12H <u>PCN allergy:</u> - Ceftriaxone 2g IV Q24H PLUS Metronidazole 500mg IV/PO Q8H <u>Severe β-Lactam allergy:</u> - Levofloxacin 500mg IV/PO Q24H PLUS Clindamycin 600mg IV Q8H (450mg PO Q8H)	Prophylaxis with open wound: 3 to 5 days Infected: 7 to 14 days
Necrotizing Fasciitis	Vancomycin IV PLUS Cefepime 1g IV Q8H PLUS Clindamycin 900mg IV Q8H • <i>ID Consultation recommended</i>	7+ days depending on clinical resolution
Open Fracture Prophylaxis	<u>Type I and II</u> - Cefazolin 2g (3g if weight >120kg) IV Q8H <u>Severe β-lactam allergy:</u> - Clindamycin 900mg IV Q8H <u>Known MRSA colonization:</u> -Add Vancomycin IV	24 hours
	<u>Type III (No gross contamination)</u> - Ceftriaxone 2g IV q24H <u>Severe β-lactam allergy:</u> - Levofloxacin 500mg IV Q24H PLUS Clindamycin 900mg IV Q8H <u>Known MRSA colonization:</u> -Add Vancomycin IV	24 hours after wound closure (max 48 hours)
	<u>Type III (SOIL or FECAL contamination)</u> - Ceftriaxone 2g IV Q24H PLUS Metronidazole 500mg IV Q8H <u>Severe β-lactam allergy:</u> - Levofloxacin 500mg IV Q24H PLUS Metronidazole 500mg IV Q8H <u>Known MRSA colonization:</u> -Add Vancomycin IV	48 hours after wound closure
	<u>Type III (Standing water contamination)</u> - Piperacillin/Tazobactam 4.5g IV Q8H <u>Severe β-lactam allergy:</u> - Levofloxacin 500mg IV Q24H PLUS Clindamycin 900mg IV Q8H <u>Known MRSA colonization:</u> -Add Vancomycin IV	48 hours after wound closure
Septic Arthritis/Joint	Vancomycin IV PLUS Ceftriaxone 2g IV Q24H • <i>ID Consultation recommended</i>	2-6 weeks
Osteomyelitis	Vancomycin IV , therapy should be adjusted based on gram stain/bacteria identification • <i>ID Consultation recommended</i>	4-6 weeks