

INFECTIOUS DISEASE

Dr. Eberly's Antibiotic Cheat Sheet

MSSA

Nafcillin or Oxacillin
Cefazolin (Ancef)
Clindamycin (*if D-test negative*)
Ampicillin/Sulbactam (Unasyn)
Piperacillin/Tazobactam (Zosyn)
Ticarcillin/Clavulanate (Timentin)
Fluoroquinolones (i.e. Cipro, Levaquin)
Cefuroxime

PO Cephalexin (Keflex)
PO Amoxicillin/Clav (Augmentin)
PO Dicloxacillin
PO Fluoroquinolones

MRSA (these will also cover MSSA)
Vancomycin
Linezolid – \$\$\$
Clindamycin (*if D-test negative*)
TMP/SMX – does not cover GABHS
Doxycycline

PSEUDOMONAS

Ceftazidime
Cefepime
Piperacillin/Tazobactam (Zosyn)
Ticarcillin/Clavulanate (Timentin)
Fluoroquinolones
Aminoglycosides
→ Gentamicin, Tobramycin, Amikacin
Meropenem
Imipenem
Aztreonam (for PCN-allergic)

ANAEROBES

Metronidazole (Flagyl)
Clindamycin (*not for CNS*)
Ampicillin/Sulbactam (Unasyn); PO Amox/Clav
Piperacillin/Tazobactam (Zosyn)
Meropenem
Imipenem
Ertapenem
Cefoxitin > Cefotetan
Moxifloxacin

ENTEROCOCCUS

Ampicillin, PCN, Amp/Sulbactam
+Gentamicin 1mg/kg/dose TID for synergy
Piperacillin/Tazobactam
Vancomycin – use only if Amp-R
Imipenem > Meropenem
Linezolid – for VRE
→ *No Cephalosporins!*

OTHERS

Mycoplasma – Azithromycin, Doxycycline, Fluoroquinolones
Pneumococcus – Ceftriaxone, Cefotaxime, PO 3rd gen ceph,
or high-dose Amoxicillin (BID for AOM, TID for PNA)
add Vancomycin for meningitis until sens known
GABHS – PCN, Amp, Amox, Cephalosporins, Azithromycin
3-5% have resistance to Clindamycin
Group B Strep – PCN or Ampicillin ± Gentamicin
Coagulase negative Staph – Vancomycin
Neisseria - Ceftriaxone
Rickettsia - Doxycycline
Stenotrophomonas – TMP/SMX
TB – see me Matt Eberly, MD