

## Adult specific UTI dosing chart for the ER

Generic (Brand) name	Antibiogram	Dose	Duration (days)	Renal dose adjustment	<sup>9</sup> Preg. Cat/unsafe trim/BF	Complicated UTI	Comments
<sup>1</sup> Amoxicillin/Clavulanate (Augmentin)	Site Specific	<sup>1</sup> 500mg PO TID	<sup>1</sup> 7	<sup>1</sup> CrCl10-30mL/min: 500mg BID CrCl<10mL/min: 500mg QDay	B/safe/safe	NO	CI: PCN allergy
<sup>2</sup> Ceftriaxone (Rocephin) DOC	Site Specific	<sup>2</sup> 1 to 2 g IV/IM QDay or in divided doses BID	<sup>2</sup> 4 to 14	<sup>2</sup> No dose adjustment. Monitor level in Dialysis	B/safe/safe	<sup>2</sup> Up to 4 g/day	<sup>2</sup> Continue 2 days after the signs and symptoms go away
<sup>3</sup> Cephalexin (Keflex)	Site Specific	<sup>3</sup> 500mg PO BID	<sup>3</sup> 7 to 14	<sup>3</sup> No dose adjustment. Give usual dose Q12H	C/safe/safe	NO	
<sup>4</sup> Ciprofloxacin (Cipro)	Site Specific	<sup>4</sup> 250mg PO BID	<sup>4</sup> 3	<sup>4</sup> CrCl29-5mL/min: 250-500mg Q18H HD or PD: 500mg Q24H	C/1 <sup>st</sup> /unsafe	<sup>4</sup> 500mg PO BID/ x7-14days	<sup>4</sup> BBW: tendonitis
<sup>5</sup> Levofloxacin (Levoquin, Quixin, Iquix)	Site Specific	<sup>5</sup> 250mg PO QDay	<sup>5</sup> 3	<sup>5</sup> CrCl20-49mL/min: 500mg initially, then 250mg Q24H CrCl10-19mL/min or Dialysis: 500mg initially, then 250mg Q48H	C/1 <sup>st</sup> /probably safe	<sup>5</sup> Acute pyelonephritis: 750mg PO QDay/ x5 days	<sup>5</sup> BBW: tendonitis
<sup>6</sup> Nitrofurantoin (Furadantin)	Site Specific	<sup>8</sup> 100mg PO BID	<sup>8</sup> 5	<sup>6</sup> Contraindication: CrCl <60 mL/min or elevated SCr	B/3 <sup>rd</sup> /probably safe	NO	<sup>6</sup> Duration x3 days if urine is sterile
<sup>7</sup> TMP-SMX (Bactrim, Septra, Sulfatrim)	Site Specific	<sup>7,8</sup> 1 DS tab PO BID	<sup>7</sup> 3	<sup>7</sup> CrCl>30mL/min: normal dose CrCl15-30mL/min: half dose CrCl<15mL/min: not rec.	C/low risk 1 <sup>st</sup> -3 <sup>rd</sup> /safe	<sup>7</sup> Acute pyelonephritis: 1 DS tab PO BID/ x14 days	<sup>7</sup> CI in patients with hypersensitivity to sulfonamides and/or trimethoprim

Last modified: 5/4/13 by Christian Mbangha Muenyi for [PharmPsych.com](http://PharmPsych.com)

## **Abbreviations**

**DS: double strength. Preg. Cat: pregnancy category. Trim: trimester. BF: breast feeding. UTI: urinary tract infection. PCN: penicillin CI: contraindication. BBW: Blackbox warning HD: Hemodialysis. CAPD: chronic ambulatory peritoneal dialysis**

## **References:**

1. Amoxicillin/Clavulanate. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
2. Ceftriaxone. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
3. Cephalexin. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
4. Ciprofloxacin. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
5. Levofloxacin. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
6. Nitrofurantoin. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
7. Sulfamethoxazole/Trimethoprim. In: DRUGPOINTS (Internet Database). Greenwood Village, CO. Thomson Reuters (Healthcare) Inc.
8. Kalpana Gupta et al. International Clinical Practice Guidelines for the Treatment of Acute Uncomplicated Cystitis and Pyelonephritis in Women: A 2010 Update by the Infectious Diseases Society of America and the European Society for Microbiology and Infectious Diseases. *Clinical Infectious Diseases* 2011;52(5):e103–e120
9. Briggs GG, Freeman RK, Yaffe SJ. *Drugs in pregnancy and lactation: a reference guide to fetal and neonatal risk.* 9th ed. Baltimore: Williams & Wilkins;