

BC Provincial Antimicrobial Clinical Expert (PACE) Committee *Ceftriaxone – Adult Dosing Recommendations*

Key Messages:

- Ceftriaxone 1 g IV Q24H provides adequate treatment for most infections.
- Reserve higher ceftriaxone dosing for critical illness, infective endocarditis and meningitis.

Background:

- Ceftriaxone is commonly prescribed to treat community-acquired pneumonia (CAP), intra-abdominal infections, pyelonephritis, bacteremia and central nervous system (CNS) infections.
- The choice of using ceftriaxone 1 g vs. 2 g can be confusing for clinicians; the higher ceftriaxone dose is often unnecessary.

The Facts:

- Appropriate ceftriaxone dosing depends on pathogen(s) involved, site of infection, and severity of infection.

The Solution:

Indications	Ceftriaxone 1 g IV Q24H*	Ceftriaxone 2 g IV Q24H	Ceftriaxone 2 g IV Q12H
<u>Pneumonia (community-acquired)</u> - inpatient pneumonia	✓	If critically ill consider: ✓	
<u>Urinary tract infections (community-acquired)</u> - pyelonephritis - complicated UTI	✓	If critically ill consider: ✓	
<u>Intra-abdominal infections (community-acquired)</u> - cholecystitis - appendicitis - peritonitis	✓	If critically ill consider: ✓	
<u>Endocarditis</u> - streptococcal - HACEK Gram-negative bacilli† - enterococcal, combination therapy††		✓	
		✓	
			✓
<u>Meningitis</u>			✓

* Consider Ceftriaxone 2 g IV daily if obese (greater than 100 kg)

† HACEK organisms: *Haemophilus spp.*, *Aggregatibacter spp.*, *Cardiobacterium hominis*, *Eikenella corrodens*, *Kingella spp.*

†† Always in combination with ampicillin 2 g IV Q4H