CELLULITIS FLOWSHEET.

(addressograph)

This flow sheet will be used for patients suitable for daily ED Management per the Cellulites Pathway

Class II Suggestion: First Line: ☐ Probenecid 1 gm po q 24 hours PLUS Cefazolin 2 gm IV q 24 hours
First Line: ☐ Ceftriaxone 1 gm IV q 24 hours
Second Line: ☐ Clindamycin 600 mgm IV q 8 hrs

Antibiotic choice: Indicate Antibiotic choice above and continue until day 4 or stopped by MD
For patients presenting after 22:00 hrs-consider Cefazolin without Probenecid.
Subsequent doses will be given at 08:00 in the ED (Probenecid will be given with 2nd and subsequent doses as ordered.)

- IV medication administration will occur at 08:00 in the ED
- MD will review patient **daily** after antibiotics given and will determine if IV antibiotics will be continued on Day 4
- Switch to oral therapy when pyrexia settling, co-morbidities stable, less intense erythema, falling inflammatory markers (if ordered)
- Saline locks to be changed q 3 days or prn.

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Antibiotic Flow Sheet (Use for First Line Daily Antibiotic Choices Only)

Day	Date	Time	Antibiotic and dosage	**Probenecid ordered** ☐YES ☐NO **(draw line through entire box if not ordered)**	SL status	Seen by Physician	Nurse signature
Day 1> 2000 hr (First line Cefazolin only)				None to be given			
Day 1 < 2000 hrs				1 gm probenecid			
Day 2-0800				1 gram probenecid			
Day 3-0800				1 gm probenecid			
Day 4-0800				1 gm probenecid			

Please addressograph and complete.

Fax to Family Physician daily