NOTE: Most outpatient therapy is 7–10 days in duration. Antibiotics are listed in order of recommendation.

**SIMPLE ABSCESS**

Abscess <5 cm, with no extending cellulitis or other significant comorbidities

- Abscess tray (11 blade, hemostat)
- Ribbon gauze (optional)
- Vessel loop (optional)

**ABSCESS PLUS CELLULITIS**

- Abscess tray (11 blade, hemostat)
- Ribbon gauze (optional)
- Vessel loop (optional)

One of the following:

- TMP/SMX DS 2 tabs PO, twice a day
- Doxycycline 100 mg PO, twice a day
- Clindamycin 300 mg PO, 4 times a day

To give more strep coverage for patients on TMP/SMX or doxycycline, consider:

- Cephalexin 500 mg PO, 4 times daily

**SIMPLE CELLULITIS**

If no concern for MRSA, one of the following:

- Cephalexin 500 mg PO, 4 times a day
- Dicloxacillin 250 mg PO, 4 times a day

If risk factors for MRSA, consider one of the following:

- Cephalexin 500 mg PO, 4 times a day plus TMP/SMX DS 2 tabs PO, twice a day
- Cephalexin 500 mg PO, 4 times a day plus Doxycycline 100 mg PO, twice a day
- Clindamycin 300–450 mg PO, 4 times a day
  
  AND
  
- Skin and soft tissue ultrasound

**COMPLICATED ABSCESS AND/OR CELLULITIS: OUTPATIENT**

Most patients may be treated with oral antibiotics (one of the following):

- Cephalexin 500 mg PO, 4 times a day **plus**
  - TMP/SMX DS 2 tabs PO, twice a day
- Cephalexin 500 mg PO, 4 times a day **plus**
  - Doxycycline 100 mg PO, twice a day
- Clindamycin 300 mg PO, 4 times a day

If IV therapy is required:

- Social work — to arrange infusion therapy for 48 hrs
- Skin and soft tissue ultrasound

Plus one of the following:

- Ceftriaxone 1–2 grams IV, once a day **PLUS**
  - TMP/SMX DS 2 tabs PO, twice a day **or**
  - Doxycycline 100 mg PO, twice a day
- Vancomycin 15 mg/kg x 1 (additional doses based on CrCl)
  - Cefazolin 1 gram IV, once daily **PLUS**
  - Probenecid 1 gram PO, once a day (if GFR >60) **PLUS**
    - TMP/SMX DS 2 tabs PO, twice a day **or**
    - Doxycycline 100 mg PO, twice a day
- Vancomycin 15 mg/kg IV x 1
- Clindamycin 600 mg IV x 1

**COMPLICATED ABSCESS AND/OR CELLULITIS: INPATIENT**

If NON-sepsis or ICU admit, one of the following:

- Vancomycin 15 mg/kg IV x 1
- Clindamycin 600 mg IV x 1
  
  **Plus, if gram-negative coverage is needed:**
  
  - Ceftriaxone 1–2 grams IV x 1

If sepsis or ICU admit:

- Vancomycin 25 mg/kg IV x 1
  
  **Plus one of the following:**
  
  - Piperacillin-tazobactam 3.375 grams IV x 1
  - Meropenem 1 gram IV x 1