

SHC Antimicrobial Renal Dosing Guidelines in Adults: ORAL Administration

These are general dosing guidelines for reference only. Doses may vary based on indications, severity, and/or patient factors. Please contact Pharm with questions/concerns

Drugs are typically dosed based on CrCL, which may differ from eGFR. Calculated CrCL takes into patient specific age, weight, etc.

$$\text{CrCL (mL/min)} = \frac{[140 - \text{age}] * \text{Wt(kg)}}{72 * \text{SCr (mg/dL)}} * \text{gender factor (male=1, female=0.85)}$$

Wt may need to be adjusted for obese patients. SCr may need to be adjusted for special patient populations

CrCL Calculator: <http://clincalc.com/Kinetics/CrCl.aspx>[£]

Usual Doses of Antimicrobials Typically Not Requiring Renal Adjustment

Azithromycin	250 – 500 mg daily		Metronidazole^a	500 mg BID – TID
Clindamycin	300 – 450 mg TID		Penicillin VK	500 mg QID
Doxycycline	100 mg BID		Itraconazole	200 mg daily – BID
Fosfomycin	Uncomplicated cystitis: 3 g x 1 Complicated: 3 g Q48hr x 3 doses (off-label)		Posaconazole	Based on indication and formulation. See Cerner CareSet
Linezolid	600 mg BID		Voriconazole	Based on indication. See Cerner CareSet

Usual Doses of Antimicrobials Needing Renal Adjustment

	Usual Dose ^b CrCL ≥ 50 mL/min	CrCL 49-30 mL/min	CrCL 29-10 mL/min	CrCL < 10 mL/min or hemodialysis
Amoxicillin (Ampicillin^c)	500 mg TID	500 mg TID	500 mg BID	500 mg daily
Amoxicillin/Clavulanate^d	500 TID or 875mg BID	500 TID or 875mg BID	500 mg BID	500 mg daily
Bactrim^{®e} (Trimethoprim/Sulfamethoxazole)	<i>1 DS tab contains 160 mg of TMP</i>			
UTI	1 DS tab BID	1 DS tab BID	1 DS tab daily	Not usually recommended Consult Pharmacy
SSTI ^e , Systemic Infections	8-12 mg/kg/day TMP in 2-3 divided doses	8-12 mg/kg/day TMP in 2-3 divided doses	4-6 mg/kg day TMP daily	
Cephalexin				
Usual Dose	500 mg TID-QID	500 mg TID-QID	500 mg TID	250-500 mg daily
High Dose for SSTI	1000 mg TID-QID ^h	1000 mg TID-QID ^h	1000 mg BID-TID	1000 mg daily
Cefuroxime	250-500 mg BID	250-500 mg BID	250-500 mg BID	250-500 mg daily
Cefpodoxime	100-200 mg BID	100-200 mg BID	100-200 mg daily	HD: 3x/wk post-HD
Ciprofloxacin				
Standard dose	500 mg BID	500 mg BID	250 mg BID	500 mg daily
High dose	750 mg BID	750 mg BID	500 mg BID	500 mg daily

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^aSome recommendations include metronidazole 500 mg BID for prolonged use (e.g. > 14 days) for patients on iHD and/or hepatic failure (Child-Pugh C)

^bDoses and need for renal adjustment may differ for parenteral (e.g. IV) administration. Usual PO doses for common indications. Please refer to indication-specific dosing as necessary

^cPO amoxicillin has more favorable bioavailability than PO ampicillin

^dDosed on amoxicillin

^eConsider weight-based dosing especially for obese patients using adjusted BW.

^fMay consider loading dose of 400-800mg based on indication/severity.

^gRevised dosing per manufacturer. Guidelines updated post Supervisory and P&T approval.

^hMaximum 4g daily dose for CrCL ≥30mL/min should be reserved for weight > 80kg

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	CrCL ≥ 50 mL/min	CrCL 49-20 mL/min	CrCL 19-10 mL/min	CrCL <10mL/min, HD
Levofloxacin <i>Note different renal function ranges</i>	750 mg daily (preferred)	750 mg Q48	750 mg x1, then 500 mg Q48	750 mg x1, then 500 mg Q48
	500 mg daily (<45 kg)	500 mg Q48	500 mg x1, then 250 mg Q48	500 mg x1, then 250 mg Q48
Nitrofurantoin	CrCL ≥ 50 mL/min	Avoid use if CrCL <40-50 mL/min. Drug will not reach bladder to adequately treat cystitis. Exercise caution in elderly patients, who inherently have renal dysfunction due to age		
Macrobid®	100 mg BID			
Macrochantin®	50-100 mg QID			
	Usual Dose^{a,b} CrCL ≥ 50 mL/min	CrCL 49-30 mL/min	CrCL 29-10 mL/min	CrCL < 10 mL/min or hemodialysis
Fluconazole				
Candidal UTI	200 mg daily	100 mg daily ^f	100 mg daily ^f	100mg Q24
Systemic infections	400 mg daily	200 mg daily ^f	200 mg daily ^f	200mg Q24 ^f
Meningitis	800 mg daily	400 mg daily ^f	400 mg daily ^f	400mg Q24 ^f
Acyclovir				
Suppression	400 mg BID	400 mg BID	400 mg BID	400 mg daily
Genital or Oral HSV	400 mg TID	400 mg TID	400 mg BID	400 mg daily
Zoster (shingles)	800 mg 5x/day	800 mg 5x/day	800 mg TID	800 mg BID
Valacyclovir				
Suppression	1 g daily	1 g daily	500 mg daily	500 mg daily
Genital herpes	500 mg – 1 g BID	500 mg – 1 g BID	500 mg – 1 g daily	500 mg daily
Zoster (shingles)	1 g TID	1 g BID	1 g daily	500 mg daily
Oseltamivir (updated)^g <i>Note different renal function ranges</i>	CrCL >60 mL/min	CrCL 60-31 mL/min	CrCL 30-11 mL/min	CrCL <10 mL/min or iHD
Treatment	75 mg BID	30 mg BID	30 mg daily	30 mg x 1, then 30 mg post-HD
Prophylaxis	75 mg daily	30 mg daily	30 mg Q48	30 mg x 1, then post every other HD
Valganciclovir	Consult Pharmacy – Varies by indication			

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