





**BOX 2: Criteria for Outpatient Management:**

- Afebrile and non-toxic
- Ambulatory and able to commute to hospital for outpatient treatment
- Able to care for self
- Tolerating PO fluids
- Pain controlled with oral pain meds
- Doesn't require hospitalization for elevation of extremity

**Empiric oral antibiotic:**

**Adults:**  
Amoxicillin 500 mg PO TID  
**PCN allergy (non Type 1):**  
Cephalexin 500-1000 mg PO TID  
**For Type 1 PCN allergy or cephalosporin allergy:**  
Clindamycin 450 mg PO TID

**Children:**  
Amoxicillin 45 mg/kg/dose PO BID  
**PCN allergy (non Type 1):**  
Cephalexin 25 mg/kg/dose PO QID  
**For Type 1 PCN allergy or cephalosporin allergy:**  
Clindamycin 10-13 mg/kg/dose PO TID

**\*Antibiotic duration 5-7 days**

**Empiric IV Antibiotics:**

**Adults:**  
Cefazolin 2 gram IV q8 hours  
**For Type1 PCN or cephalosporin allergy:**  
Clindamycin 600 mg IV q8 hours

**Children:**  
Cefazolin 25 mg/kg/dose IV q8 hours  
**For Type1 PCN or cephalosporin allergy:**  
Clindamycin 10 -13 mg/kg/dose IV q8 hours

- Consider undrained focus of infection
- For non-purulent cellulitis, consider change to IV vancomycin
- Consider ID consult

Manage as inpatient until meets criteria for outpatient management