



Antibiotics for peritonsillar abscess:

Ampicillin-sulbactam 3 grams IV q6h for adults and 50 mg/kg/dose (based on ampicillin, max 3 grams) IV q6h for pediatrics.

If penicillin allergic:

Clindamycin 600 mg IV q6h for adults and 13 mg/kg/dose (max 600 mg) IV q8h for pediatrics.

If severe disease:

Consider coverage for MRSA with vancomycin.

Once able to transition to oral:

Amoxicillin-clavulanate 875 mg PO BID for adults and 45 mg/kg/dose (max 875 mg) PO BID for pediatrics.

If penicillin allergic:

Clindamycin 300 mg PO 4 times daily for adults and 13 mg/kg/dose PO 3 times daily for pediatrics.

Total duration of treatment: 14 days

This guideline is designed for the general use of most patients but may need to be adapted to meet the special needs of a specific patient as determined by the medical practitioner.
Approved by MSEC 4/14/20.

If comments about this guideline, please contact Elizabeth_Bates@ykhc.org.