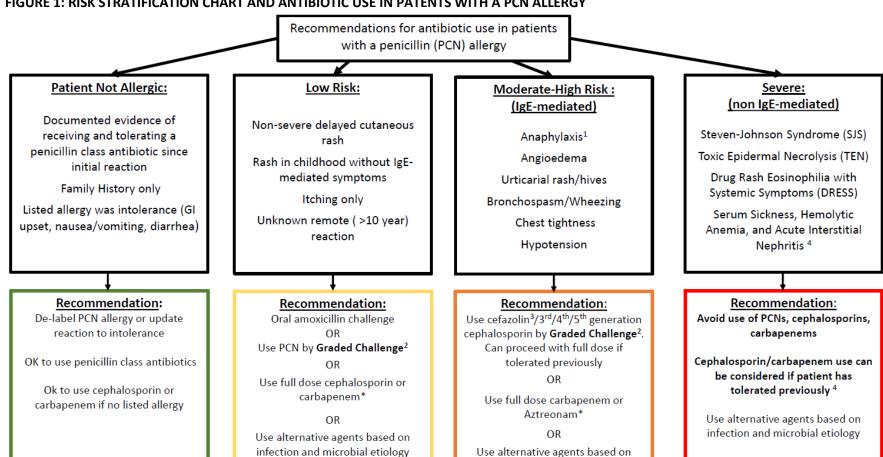


APPENDIX:

FIGURE 1: RISK STRATIFICATION CHART AND ANTIBIOTIC USE IN PATENTS WITH A PCN ALLERGY



¹ Anaphylaxis requires signs/symptoms in at least 2 of the following systems: skin, respiratory, cardiovascular, gastrointestinal

infection and microbial etiology

Developed by: UNC Medical Center Carolina Antimicrobial Stewardship Program

Approved by: Anti-infective P&T Subcommitte, P&T Committee, and Acute Care Services Pharmacy Practice Council

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² Graded Challenge: 10% of the total antibiotic dose as a slow administration. Observe for 30 minutes and obtain vitals prior to administration of remaining dose.

³ Cefazolin does not share a similar side group chain with any other penicillin or cephalosporin and risk of cross-reactivity is low. Use of cephalexin and other 2nd generation cephalosporins is not recommended due side chain similarities to aminopenicillins.

⁴ There is very limited information about cross-reactivity amongst beta-lactams for reactions such as serum sickness-like reactions, hemolytic anemia, acute interstitial nephritis and avoidance of cephaloporins and carbapenems may not be indicated. If an antibiotic from these classes is utilized, close monitoring of laboratory parameters and patient clinical status is recommended.

^{*}Full dose indicated only if patient has not experienced a previous allergic reaction to antibiotic in class